



Draft Annual Action Plan FY 2018-19

The City of Raleigh
Housing and Neighborhoods Department
Community Development Division
raleighnc.gov

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This 2018-2019 Annual Action Plan is the fourth year of Raleigh's 2016-2020 Five-Year Consolidated Plan, required by the U.S. Department of Housing and Urban Development (HUD) that identifies an entitlement community's priority housing and community development needs for very low-, low-, and moderate-income city residents and the strategies the community has developed to address them. The Consolidated Plan provides guidance for Raleigh for the period July 1, 2016—June 30, 2020. The City of Raleigh must submit an Action Plan every year to illustrate how it is achieving its housing and community development needs.

The Annual Action Plan also functions as an application for funding from HUD for the following federal programs:

- Community Development Block Grant (CDBG)
- HOME Investment Partnership (HOME)
- Emergency Solutions Grant (ESG)

The 2016-2020 Consolidated Plan established the priorities/goals that this Annual Action Plan aims to implement through the City's housing and community development programs. The three priorities are:

- Increase the supply of affordable housing
- Enhance the homeless to housing continuum
- Neighborhood revitalization

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Executive Summary

1. Introduction

This 2018-2019 Annual Action Plan is the fourth year of Raleigh's 2016-2020 Five-Year Consolidated Plan, required by the U.S. Department of Housing and Urban Development (HUD) that identifies an entitlement community's priority housing and community development needs for very low-, low-, and moderate-income city residents and the strategies the community has developed to address them.

The Consolidated Plan provides guidance for Raleigh for the period July 1, 2016—June 30, 2020. The City of Raleigh must submit an Action Plan every year to illustrate how it is achieving its housing and community development needs.

The Annual Action Plan also functions as an application for funding from HUD for the following federal programs:

- Community Development Block Grant (CDBG)
- HOME Investment Partnership (HOME)
- Emergency Solutions Grant (ESG)

In addition to these federal programs, local sources of funds contribute to implementing the City of Raleigh Consolidated Plan. A staff recommendation for additional General Fund dollars for rental development and housing rehabilitation received City Council approval July 1, 2016 and this document includes the \$5.9 million in General Fund dollars available in the third year of implementation of this revenue source among the narratives and charts.

The five-year Consolidated Plan established a unified, coordinated vision for community development that benefits low-income residents and areas for the period July 1, 2015—June 30, 2020 and this one-year Plan states how that will take place from July 1, 2018 – June 30, 2019. The City of Raleigh gathers input from citizens, consults its community development partners, and conducts extensive research to determine housing and community development needs. The City partners as well with nonprofit and for-profit organizations, neighborhood groups, and other local governments to undertake specific actions with the strategies developed. A key element of the Consolidated Plan and each Annual Action Plan is the collaborative nature of the process.

2. Summarize the objectives and outcomes identified in the Annual Action Plan

The 2016-2020 Consolidated Plan established the priorities/goals that this Annual Action Plan aims to implement through the City's housing and community development programs. The three priorities are:

- Increase the supply of affordable housing
- Enhance the homeless to housing continuum
- Neighborhood revitalization

As shown in the narratives and charts contained within the Annual Action Plan, the City intends to continue its programs that offer financial assistance to developers of affordable rental housing, assist in acquisition and demolition of blighted units (with relocation of existing tenants to safe and secure housing of their choosing), loans to low- and moderate-income (LMI) homeowners need housing rehab assistance, providing second mortgage money to LMI homebuyers, provide job training and homebuyer training, assist nonprofit organizations serving low-income or homeless families, and investing in new infrastructure and affordable housing in focus neighborhoods such as College Park. In FY 2018-2019 funds will be made available in the Neighborhood Revitalization Strategy Area (NRSA) for commercial façade improvements and business up fit.

The City has been successfully partnering with the County and the Continuum of Care (CoC) organization, the Raleigh Wake Partnership to End and Prevent Homelessness (the Partnership), since 2010 to transform the way services are provided to the homeless. Progress has been made but work remains in improving the system and serving all those in need.

One challenge is the growing number of homeless single women, some living with children in cars or similar places not fit for human habitation. Veterans' homelessness is still with us, as well. The City, County, and the CoC, as primary funding sources for Wake County, in 2015 began coordinating funding more closely to increase coordination among the existing variety of services and agencies. This work began with a Combined Request for Proposals (RFP) for ESG funds where the City, County, and the CoC used the same RFP process. This change reduced paperwork for the agencies and focused funding more effectively toward homelessness prevention, emergency shelter, and rapid re-housing. The same partners, with the added participation of Catholic Charities, are working on the development of a multiservice center for the homeless. The center will function as a coordinated assessment and engagement point and will support and enhance the community effort to implement a Housing First approach.

The decision was made for the City's Emergency Solution Grant (ESG) portion of the Combined RFP process would be dedicated to homelessness prevention and supporting the Homeless Information Management System (HMIS) that all agencies receiving funding are required to use. These funds will offset the costs of the system.

The following organizations are recommended for funding from the City's anticipated Emergency Solutions Grant (ESG) allocation:

Combined RFP for FY 2018-2019, Second Year		
City of Raleigh Emergency Solutions Grant		
Agency	Recommended Award	Use of the Funds
Triangle Family Services	\$109,647	Homelessness prevention
Passage Home	\$ 75,000	Homelessness prevention
Raleigh Wake Partnership to End and Prevent Homelessness	\$ 72,000	Homeless Information Management System (HMIS)
Total City ESG funding	\$256,647	

The City also funds public services with CDBG in a grant program called Community Enhancement Grant through an annual Request for Proposal process. All services funded provide assistance to individuals and households with incomes less than 80% of area median income (AMI).

The following nonprofits are recommended by the Review Committee for CDBG public service funding for FY 2018-19:

Community Enhancement Grant, FY 2018-19		
Review Committee Recommendations for Funding		
Agency	Recommended Award	Use of the Funds
Family Resource Center South Atlantic	\$44,348	Assistance with primary needs for homeless ex-offenders reentering society
Triangle Literacy Council	\$33,486	Tutoring and mentoring for low-income and homeless youth

Passage Home	\$48,877	Life skills and culinary job training for low-income unemployed persons
Triangle Family Services	\$48,280	Financial counseling for low-income families
Total City Community Enhancement Grant funding	\$175,000	

Neighborhood revitalization was another need identified through the public process. The City has worked in redevelopment areas for decades and made great strides in revitalizing blocks within the City's priority neighborhoods. For this year the City intends to continue combining infrastructure improvements and new housing programs with existing housing programs and geographically focus them to make a concentrated impact. A Neighborhood Revitalization Strategy Area (NRSA) designation for College Park/Washington Terrace was approved by HUD to allow greater flexibility in the use of HUD funds while establishing benchmarks for accountability. In the South Park/Garner Road area the City will continue its investments and partnership with Passage Home, Inc. to address the blight of the Brown Birch Apartments. City-owned land south of Brown Birch will be sold for new affordable apartments.

3. Evaluation of past performance

It is possible to measure the first two years of the 2016-2020 Consolidated Plan. The primary programs administered by Community Development and the number of affordable housing units produced by those programs in FY 2015-2016 and FY 2016-2017 as reported in the CAPERs included:

Type	Completed	Evaluation
Rental development	71 + 394 = 465	The trajectory for new affordable units produced is upward as the City has begun to provide over \$5.5 million per year in local funding primarily for new units. 100 units were projected in FY 16-17 so the goal was exceeded by 394%.
Second mortgages	66 + 32 = 98	The first year was on target but as the bond funds were depleted that supported this program, therefore; the budgeted fund were used in full.
Homeowner rehabs	42 + 29 = 71	Only 25 were projected in FY 15-16 and 20 in FY 16-17 so the City exceeded the projections.
New construction, single-family, homebuyers	8 + 5 = 13	New infill units will increase dramatically in the latter years of the ConPlan term as lots are sold to builders in East College Park.
Total units	187+460 = 647	

4. Summary of Citizen Participation Process and consultation process

The Planning Process

All comments gathered during the public input process and consultations with the City's community development partners in the development of this plan have been included as attachments.

Public Meetings and Hearings

Participation of the general public and public and private organizations is important to the development of this

Annual Action Plan. The meetings included two public hearings (December 5, 2017 and April 3, 2018), four public meetings (November 9th, 14th, and 16th, 2017, as well as March 15th, 2018). The Public Hearings were advertised in local newspapers at least 12-14 days in advance, as were the four public meetings. The City worked on gathering this input from its community development partners and information was shared among them. This input helped identify and prioritize community needs, develop strategies and actions, identify community resources, and promote the coordination of resources. Representatives from public and private agencies affiliated with assisted housing, health services, social services, and services for the homeless were invited to individual and group meetings to obtain information from, and provide input to, the development of the Consolidated Plan on which the Annual Action Plan is based.

Lead Agency: Raleigh's Housing & Neighborhoods Department, Community Development Division

Community Development acts as the primary liaison with other local public agencies and nonprofit and for-profit entities such as lenders, realtors, developers, builders, and city residents. Other agencies engaged in implementing this plan include the federal Department of Housing and Urban Development (HUD), the North Carolina Housing Finance Agency, Wake County Human Services, and the Raleigh Housing Authority.

5. Summary of public comments

See Attachment.

Lead & Responsible Agencies

Agency Role	Name	Department/Agency
CDBG Administrator	RALEIGH	Housing & Neighborhoods Dept.
HOME Administrator	RALEIGH	Housing & Neighborhoods Dept.
ESG Administrator	RALEIGH	Housing & Neighborhoods Dept.

Table 1 – Responsible Agencies

This document is the Annual Action Plan for the City of Raleigh, an entitlement community, for the fiscal year 2018-2019. Raleigh receives the following funds annually from HUD: Community Development Block Grant (CDBG), HOME Partnership (HOME), and Emergency Solutions Grant (ESG) funds. Residents of Raleigh have also approved several Affordable Housing Bond issuances since 1990, and in 2016 the City Council voted to replace them with General Fund dollars via a 1 cent ad valorem tax. The tax produces over \$5.6 million annually, and is projected to be available for affordable rental housing development in FY 2018-2019.

The Housing & Neighborhoods Department, Community Development Division, is the unit of city government that acts as primary administrator of the federal entitlement funds.

Consolidated Plan Public Contact Information

Annual Action Plan Public Contact Information:

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Consultation

Several consultations were held with organizations to enhance coordination among agencies and to ascertain needs for homeless person as well as those with special needs and low incomes.

How does Community Development coordinate between public and assisted housing providers and private and governmental health, mental health and service agencies?

Community Development Division (CDD) staff has regular communication with the Raleigh Housing Authority to discuss the status and goals of their Public Housing and Housing Choice Vouchers. CDD has hosted meetings with RHA and local housing advocacy groups in the development of the City's new Housing Location Policy. The City has met with affordable housing stakeholder groups in developing new housing programs and made sure such gatherings included housing nonprofits who serve those with physical and mental disabilities.

Describe the coordination with the Continuum of Care and efforts to address the needs of homeless persons (particularly chronically homeless individuals and families, families with children, veterans, and unaccompanied youth) and persons at risk of homelessness.

The City is a member of the Continuum of Care (CoC), also known as the Raleigh Wake Partnership to End and Prevent Homelessness (Raleigh Wake Partnership). A Community Development Planner II sits on the Board of Directors of the CoC. Full membership meetings are held bi-monthly with attendance ranging from 40-70 persons. Agencies awarded funds through the Combined Request for Proposal process of the City, the CoC, and the County, must be dues paying members of the Raleigh Wake Partnership, must use the HMIS database, and must use the Vi-SPDAT as the intake tool to prioritize need. The Raleigh Wake Partnership is a member of the statewide HMIS Committee. Members of the CoC participate in several committees working to transform the local homeless services delivery system into a Housing First, low-barrier model using coordinated entry and assessment. The Executive Director of the Raleigh Wake Partnership helps coordinate all this activity. Both the City and the County contribute to the operational expenses of the CoC.

Efforts to address the needs of persons who are homeless that the City helps fund include:

- Oak City Outreach Center provides meals on weekends and serves as an engagement center to help people with their other needs. The City partners with the CoC and Catholic Charities to operate this City-owned facility.
- South Wilmington Street Center for homeless men, which also has a focus on Veterans: the center receives operational funding from the City
- PLM Families Together, that offers Rapid Rehousing to homeless families with children
- Hope Center at Pullen that offers rapid rehousing, homelessness prevention, and case management for unaccompanied youth
- Women's Center of Wake County, that offers rapid rehousing to homeless single women
- Catholic Charities, that offers rapid rehousing and homelessness prevention to homeless families with children. This program uses local dollars.

The City, the County, the CoC, and Catholic Charities are working together on the development of a multi-service center for the homeless to be called Oak City Center. The City is allocating \$3.1 million of local funds to its development. The development of the new center is anticipated to be approximately \$7,000,000, with the County covering the balance. The County on March 20, 2017, acquired the site at 1430 South Wilmington Street, next to the South Wilmington Street Center, as the location for the new Oak City Center. The Oak City Center will be the central site for coordinated intake and assessment, as well as weekend food distribution. Catholic Charities and the CoC will operate the center.

Describe the consultation with the Continuum(s) of Care that serves the city of Raleigh in determining how to allocate ESG funds, develop performance standards for and evaluate outcomes of projects and activities assisted by ESG funds, and develop funding, policies and procedures for the operation and administration of HMIS (software system for homeless agencies).

The City works closely with the CoC, sometimes on a daily basis. In 2015, the City of Raleigh, Wake County, and the CoC partnered to issue a Combined Request for Proposals for Housing and Homeless Assistance funds. The City of Raleigh coordinates the allocation of its ESG entitlement with Wake County's local dollars, and the state ESG entitlement requiring CoC endorsement based on agreed upon community priorities. The City actively participated in the taskforce that developed written standards for the CoC. The City of Raleigh, Wake County and the CoC have allocated funding for, and are participating in North Carolina's statewide implementation of Homeless Management Information System (HMIS) which is governed by representatives from across the state putting in place HMIS policies and procedures. Agencies receiving ESG funds are required to use the HMIS, except for agencies that serve domestic violence victims (DV).

2. Describe Agencies, groups, organizations and others who participated in the process.

Table 2 – Agencies, groups, organizations who participated

1	Agency/Group/Organization	Raleigh Housing Authority (RHA)
	Agency/Group/Organization Type	Public Housing Authority (PHA)
	What section of the Plan was addressed by Consultation?	Public Housing Needs
	Briefly describe how the Agency/Group/Organization was consulted. What are the anticipated outcomes of the consultation or areas for improved coordination?	Feb 21, 2017: Made presentation, gathered input at a CoC membership meeting regarding proposed general areas of City allocation of federal and local funds for FY 2017-18

Identify any Agency Types not consulted and provide rationale for not consulting

Raleigh Housing Authority provided a portion of the narrative in this Annual Action Plan (AP-60) addressing the on-going challenges administering vouchers and managing several large public housing communities.

Other local/regional/state/federal planning efforts considered when preparing the Plan

Name of Plan	Lead Organization	How do the goals of your Strategic Plan overlap with the goals of each plan?
Continuum of Care	Raleigh Wake Partnership to End and Prevent Homelessness	We consulted the CoC in the development of the Consolidated Plan.

Table 3 – Other local / regional / federal planning efforts**Participation****1. Summary of citizen participation process/Efforts made to broaden citizen participation and impacted goal-setting.**

The citizen participation process included the following:

- Two public hearings
- Two public meetings held in low-income Census Tracts
- Community Consultations with the Continuum of Care the (Partnership to End and Prevent Homelessness
- Presentations at Citizen Advisory Council meetings
- Draft Annual Action Plan being made available to the public for comment.

These meetings impacted goal setting by letting us know which populations and neighborhoods to focus on in our Action Plan, and what kinds of programs would best serve these populations.

Citizen Participation Outreach Table

Sort Order	Mode of Outreach	Target of Outreach	Summary of response/attendance	Summary of comments received	Summary of comments not accepted and reasons	URL (If applicable)
1	Public Hearing	Non-targeted/broad community	City Council Chambers Dec. 5, 2017	Seven persons spoke at the public hearing. A summary of comments is in an attachment.		
2	Public Meeting	Non-targeted/broad community Low-income Census Tract focus	Method Road Community Center; Nov. 9, 2017; 12 present	See attachment.		
3	Public Meeting	Non-targeted/broad community Low-income Census Tract focus	Brentwood Community Center; Nov. 14, 2017; 15 present	See attachment.		
4	Public Meeting	Non-targeted/broad community Citizen Advisory Council Meeting	Chavis Community Center; Nov. 16, 2017; 25 present	See attachment.		
5	Public Meeting	Non-targeted/broad community	Chavis Community Center, March 15, 2018	Will post in attachment.		
6	Public Hearing	Non-targeted/broad community	City Council Chambers April 3, 2018	Will post in attachment.		

Table 4 – Citizen Participation Outreach

Expected Funding

The City of Raleigh expects to have between \$7 million to \$11 million per year for each of the 5 years covered by the Consolidated Plan. The sources of funding are: federal Community Development Block Grant (CDBG), federal HOME Investment Partnerships (HOME), federal Emergency Solutions Grant (ESG), remaining City of Raleigh Affordable Housing Bonds, and City of Raleigh General Funds.

Priority Table

Program	Source of Funds	Uses of Funds	Expected Amount Available Year 1				Expected Amount Available Reminder of ConPlan \$	Narrative Description
			Annual Allocation: \$	Program Income: \$	Prior Year Resources: \$	Total: \$		
CDBG	public - federal	Acquisition, Admin and Planning, Economic Development, Relocation						Acquisition loan to developer of affordable rentals, assistance to nonprofit organization to relocate tenants from dilapidated rentals in South Park/Garner Road area; demolition of units; homeowner rehab assistance; public services (nonprofit grants, homebuyer training, job training, grant to South Wilmington Street Men's Shelter); site improvements for affordable infill housing; homebuyer assistance.
		Demolition, Public Improvements, Public Services, Job training Homeowner rehab	2,872,414	850,000	21,652	3,744,066	3,750,000	

Program	Source of Funds	Uses of Funds	Expected Amount Available Year 1				Expected Amount Available Reminder of ConPlan \$	Narrative Description
			Annual Allocation: \$	Program Income: \$	Prior Year Resources: \$	Total: \$		
HOME	public - federal	Homebuyer assistance Multifamily rental new construction Multifamily rental rehab	1,070,124	1,061,852	15,021	2,146,997	2,150,000	Low-interest second mortgage financing for low- and moderate-income first time homebuyers; low-interest affordable multi-family development loans; assistance to Community Housing Development Organization (CHDO)
ESG	public - federal	Homelessness prevention; financial assistance; support for HMIS. Overnight shelter, rapid re-housing, & rental assistance services.	256,647	0	0	256,647	260,000	Raleigh Wake Partnership to End and Prevent Homelessness (area CoC): \$72,000 HMIS. Triangle Family Services: \$ 109,647 Prevention. Passage Home: \$75,000 Prevention
General Fund	public - local	Admin and Planning Homeowner rehab Multifamily rental new construction Multifamily rental rehab Other	5,997,000	1,000,000	0	6,997,000	8,000,000	City General Fund dollars for HOME match, housing rehab loans, affordable apartment development loans, and debt service. .

Table 5 - Expected Resources – Priority Table

Explain how federal funds will leverage those additional resources (private, state and local funds).

Federal funds will be used to leverage other funds in the following ways:

1. Affordable Housing Development: market rate loans, other public financing (City, State, County)
2. ESG: County and State ESG funds, as well as funds that will be used for one-for-one match
3. CDBG: market rate financing for homebuyers and construction for homeownership

If appropriate, describe publicly owned land, or property located within the jurisdiction, may be used to address the needs identified in the plan.

The City of Raleigh has acquired property in both the College Park redevelopment area and the South Park redevelopment area. This property will be utilized for the community development and neighborhood revitalization activities described in this Consolidated Plan.

Discussion

Funds will be used for activities that support the priorities of the Consolidated Plan:

1. Increase the Supply of Affordable Housing
2. Enhancement of the Homeless to Housing Continuum

3. Neighborhood Revitalization

Annual Goals and Objectives

Goals Summary Information Table

Sort Order	Goal Name	Start Year	End Year	Category	Geographic Area	Needs Addressed	Funding	Goal Outcome Indicator
1	Increase the supply of affordable housing	2018	2019	Affordable Housing Homeless Non-Homeless Special Needs	CITYWIDE	Supply of Affordable Housing	CDBG: \$1,659,143 HOME: \$1,738,883 General Fund: \$6,497,000	Rental units constructed: 298 Rental units rehabilitated: 152 Homeowner Housing Added: 26 Homeowner Housing Rehabilitated: 50 Direct Financial Assistance to Homebuyers: 50
2	Enhance the homeless to housing continuum	2018	2019	Homeless	CITYWIDE	Homelessness to Housing Continuum	CDBG: \$100,000 ESG: \$256,647 General Fund: \$50,000	Homelessness Prevention / Rapid Rehousing (City): 20 Households Homeless Person Overnight Shelter: 2,240 Persons Overnight/Emergency Shelter/Transitional Housing Beds added: 0 Beds Homelessness Prevention (ESG): 40 Persons Assisted

Sort Order	Goal Name	Start Year	End Year	Category	Geographic Area	Needs Addressed	Funding	Goal Outcome Indicator
3	Neighborhood revitalization	2018	2019	Affordable Housing Non-Housing Community Development	CITYWIDE, Garner Road/South Park	Neighborhood Revitalization	CDBG: \$734,260	Public Facility or Infrastructure Activities other than Low/Moderate Income Housing Benefit: 36 Persons Assisted Public service activities other than Low/Moderate Income Housing Benefit: CDBG: Family Resource Center South Atlantic: 50; Triangle Literacy Council: 110; Passage Home: 40; Triangle Family Services: 601. Total: 801 Buildings Demolished: 2 Buildings

Table 6 – Goals Summary

Goal Descriptions Table

1	Goal Name	Increase the supply of affordable housing
	Goal Description	The activities to be funded under this goal are: <ul style="list-style-type: none"> • Construction and rehabilitation of rental units • Construction and rehabilitation of homeowner housing • 2nd mortgages for homeowners
2	Goal Name	Enhance the homeless to housing continuum
	Goal Description	The activities that will be funded under this goal are: <ul style="list-style-type: none"> • Rapid re-housing • Homelessness prevention • Shelter operations • Support of the Executive Director position for the Raleigh/Wake Partnership to End and Prevent Homelessness

3	Goal Name	Neighborhood revitalization
	Goal Description	<p>The activities funded under this goal are:</p> <ul style="list-style-type: none"> • Public facility and infrastructure improvements and site planning, relocation and demolition. NOTE: beneficiary determined by counting all lots sold for new infill housing in East College Park and other areas. • Public service grants including Community Enhancement, homebuyer training, job training

Table 7 – Goal Descriptions

Estimate the number of extremely low-income, low-income, and moderate-income families to whom the City of Raleigh will provide affordable housing.

Approximately 2,800 extremely low-income, low-income, and moderate income households will be provided with affordable housing through:

Affordable Housing Development: 450

Housing Rehabilitation: 50

Rapid Rehousing/Emergency shelter for Homeless Persons: 2,260

Homelessness prevention for households at or below 30% AMI: 40

Projects

One Year Action Plans are required for each of the five years of the Five Year Consolidated Plan. This Action Plan covers July 1, 2018, through June 30, 2019 and is the fourth year of the City's 2016-2020 Consolidated Plan. The Action Plan implements the strategies in the Consolidated Plan of addressing the housing needs of very low-, low-, and moderate-income citizens of Raleigh. The One Year Plan enables investors, nonprofit organizations, program administrators, elected officials, and concerned citizens to work with the City in the development of affordable housing and community development programs.

The Action Plan describes the City's plans for the expenditure of federal housing dollars for the coming fiscal year. It outlines the activities to be carried out with three (3) formula grants: Community Development Block Grant (CDBG), Home Investment Partnership Program (HOME), and Emergency Solutions Grant (ESG). The Action Plan includes neighborhood revitalization activities funded with CDBG funds and local initiatives supported with City funds. Economic development activities and special partnerships with nonprofits and private entities are also described in the plan.

In FY 2018-19, the City anticipates a budget for housing and community development of over \$11,500,000, from federal and local resources. Programs that will continue to be funded include the Rental Development (formerly known as Joint Venture Rental) program, homeowner rehabilitation, homebuyer assistance, City-owned rental units for very low-income renters, and a job-training program. Neighborhood revitalization activities include acquisition of substandard housing, relocation of eligible households and businesses, demolition of dilapidated structures and development incentives such as infrastructure improvements to downtown neighborhood housing sites. Infill site development is an anticipated new program in FY 2018-2019 to encourage the production of additional affordable homeownership units through acquisition-demolition and/or construction assistance to nonprofit or for-profits builders.

Continuing implementation of the 2016-2020 Consolidated Plan includes affordable housing development, neighborhood revitalization and economic development to benefit the City of Raleigh's residents. The housing program is designed to serve the housing needs of five major groups of its residents: low-income renter households, homeless persons and families, elderly and persons with disabilities in need of supportive housing, low- and moderate-income (LMI) homebuyers, and LMI homeowners needing significant rehab assistance.

The projects listed below are funded with only federal funds or a combination of federal and local funds in the Action Plan year.

#	Project Name
1	Admin PACs - CDBG 18/19
2	Public Service - CDBG 18/19
3	Acquisition - CDBG 18/19
4	Relocation - CDBG 18/19
5	Demolition - CDBG 18/19
6	Disposition - CDBG 18/19
7	Pub Works/Site Improvement - 18/19
8	Rehab/Warranty - CDBG 18/19
9	Administration - HOME 18/19
10	Rental Development - 18/19
11	Homebuyer Assistance - 18/19
12	HESG - 18/19

#	Project Name
13	Economic Development - CDBG 18/19

Table 8 – Project Information

Describe the reasons for allocation priorities and any obstacles to addressing underserved needs.

All allocation priorities support the overall priorities of the Consolidated Plan and address underserved needs of lack of affordable housing, homeless services and housing, supportive housing, and neighborhood revitalization. The main obstacle in addressing underserved needs is that the needs of the community outweigh the funding available to address the needs.

Projects Summary

Project Summary Table

Table 9 – Project Summary

1	Project Name	Admin PACs - CDBG 18/19
	Target Area	CITYWIDE
	Goals Supported	Neighborhood revitalization
	Needs Addressed	Supply of Affordable Housing Homelessness to Housing Continuum Neighborhood Revitalization
	Funding	CDBG: \$748,813
	Description	Administration Costs for CDBG Program Year 2018 - COR FY18/19
	Target Date	6/30/2019
	Estimate the number and type of families that will benefit from the proposed activities	These are administrative activities which allow the City to carry out all other CDBG activities proposed in this plan.
	Location Description	Citywide
	Planned Activities	CDBG- eligible costs to administer the grant
2	Project Name	Public Service - CDBG 18/19
	Target Area	CITYWIDE
	Goals Supported	Enhance the homeless to housing continuum
	Needs Addressed	Homelessness to Housing Continuum Neighborhood Revitalization
	Funding	CDBG: \$426,000
	Description	Public Service Activities - Community Enhancement Grants – Non-Profit Support
	Target Date	6/30/2019

	Estimate the number and type of families that will benefit from the proposed activities	Approximately 2,000 low and moderate-income households will benefit from the proposed activities.
	Location Description	Activities will be carried out on a City-wide basis.
	Planned Activities	Community Enhancement Grant—Family Resource Center South Atlantic: \$44,348; Triangle Literacy Council: \$33,486; Passage Home: \$48,877; Triangle Family Services: \$48,289. Homebuyer Training \$75,000, Wilmington St. Center Operations (\$100,000), and NC Homebuilders Job Training Program (\$76,000).
3	Project Name	Acquisition - CDBG 18/19
	Target Area	CITYWIDE
	Goals Supported	Neighborhood revitalization
	Needs Addressed	Supply of Affordable Housing Neighborhood Revitalization
	Funding	CDBG: \$1,175,000
	Description	Acquisition of property to benefit Low/Mod Homebuyers. Acquisition of property to benefit First Priority Housing Needs - Very Low Income Renter Households, Homeless Persons & Families, Elderly & Persons w/Disabilities in need of Supportive Housing, Low/Mod Home-buyers, Homeowners needing significant rehab.
	Target Date	6/30/2019
	Estimate the number and type of families that will benefit from the proposed activities	This investment is to make possible the future development of 570 affordable apartments in north Raleigh.
	Location Description	N.A.
4	Planned Activities	Loan to developer to acquire land with CDBG funds. Reuse of city-purchased properties to provide safe and affordable rental housing.
	Project Name	Relocation - CDBG 18/19
	Target Area	SOUTH PARK /GARNER ROAD REDEVELOPMENT AREA
	Goals Supported	Neighborhood revitalization
	Needs Addressed	Supply of Affordable Housing Neighborhood Revitalization
	Funding	CDBG: \$50,000
	Description	Provision of moving expenses and relocation costs for existing tenants, primarily in Brown Birch Apartments. Relocation Assistance provided to Low/Mod Beneficiaries within the City of Raleigh.
	Target Date	6/30/2019

	Estimate the number and type of families that will benefit from the proposed activities	Occupants of the Brown Birch Apartments will be relocated, and other tenants affected by City redevelopment activities.
	Location Description	Brown Birch Apartments and possibly other locations.
	Planned Activities	Relocating approximately 2 households with CDBG funds.
5	Project Name	Demolition - CDBG 18/19
	Target Area	SOUTH PARK REDEVELOPMENT AREA CITYWIDE
	Goals Supported	Neighborhood revitalization
	Needs Addressed	Supply of Affordable Housing Neighborhood Revitalization
	Funding	CDBG: \$50,000
	Description	Demolition of 2 blighted properties
	Target Date	6/30/2019
	Estimate the number and type of families that will benefit from the proposed activities	Demolition is linked to acquisition and relocation.
	Location Description	Garner Road Redevelopment Area and elsewhere.
	Planned Activities	Approximately 2 buildings to be demolished in Brown Birch.
6	Project Name	Disposition - CDBG 18/19
	Target Area	College Park
	Goals Supported	Increase the Supply of Affordable Housing
	Needs Addressed	Supply of Affordable Housing
	Funding	CDBG: \$0
	Description	Disposition of City Owned Lots
	Target Date	6/30/2019
	Estimate the number and type of families that will benefit from the proposed activities	26 lots purchased with CDBG will be sold to homebuilders primarily to benefit LMI families.
	Location Description	East College Park and West Idlewild
	Planned Activities	Legal and survey costs: no new money is needed as FY 2017-2018 CDBG is available in FY 2018-2019.
7	Project Name	Pub Works/Site Imprv - 18/19
	Target Area	COLLEGE PARK
	Goals Supported	Neighborhood revitalization

	Needs Addressed	Supply of Affordable Housing Neighborhood Revitalization
	Funding	CDBG: \$308,260
	Description	Design/Planning Contracts, Environmental Assessments, Street Infrastructure, Site Improvements
	Target Date	6/30/2019
	Estimate the number and type of families that will benefit from the proposed activities	Approximately 19 households in College Park will benefit from the proposed activities.
	Location Description	East College Park, West Idlewild, and Downtown East Redevelopment Areas
	Planned Activities	Infill houses in East College Park, site prep in Cabarrus and East Streets.
	Planned Activities	Infill houses in East College Park, site prep in Cabarrus and East Streets.
8	Project Name	Owner-Occupied Home Rehab/Warranty - CDBG 18/19
	Target Area	CITYWIDE COLLEGE PARK
	Goals Supported	Neighborhood revitalization
	Needs Addressed	Neighborhood Revitalization
	Funding	CDBG: \$484,143 HOME: \$500,000
	Description	Rehabilitation of substandard housing and warranty work on the rehabilitation work completed. The has two types of owner-occupied home rehabilitation programs – substantial and limited repair. The City solicited responsible, responsive bidders to administer the limited repair program. Resources for Seniors was selected to administer the program.
	Target Date	6/30/2019
	Estimate the number and type of families that will benefit from the proposed activities	Approximately 50 low and moderate-income homeowners will benefit from the proposed activities.
	Location Description	Citywide and 2016 NRSA (College Park) area.
	Planned Activities	Approximately 50 housing units to be rehabilitated.
9	Project Name	Admin - HOME 18/19
	Target Area	CITYWIDE
	Goals Supported	Increase the supply of affordable housing
	Needs Addressed	Supply of Affordable Housing
	Funding	HOME: \$214,700
	Description	Administration Costs for HOME Program Year 2019 - COR FY18/19
	Target Date	6/30/2019

	Estimate the number and type of families that will benefit from the proposed activities	All families receiving a benefit from City HOME investments will benefit from the administrative costs incurred to provide those benefits.
	Location Description	Citywide.
	Planned Activities	Administrative activities that allow the Community Development Department to perform HOME activities.
10	Project Name	Homebuyer Assistance - HOME 18/19
	Target Area	CITYWIDE
	Goals Supported	Increase the supply of affordable housing
	Needs Addressed	Supply of Affordable Housing
	Funding	CDBG: \$150,000 HOME: \$100,000 Local (bond): \$500,000
	Description	Second mortgages for LMI buyers.
	Target Date	6/30/2019
	Estimate the number and type of families that will benefit from the proposed activities	Up to 50 LMI households
	Location Description	Citywide
	Planned Activities	Second mortgage loans
11	Project Name	Rental Development - 18/19
	Target Area	CITYWIDE
	Goals Supported	Increase the supply of affordable housing
	Needs Addressed	Supply of Affordable Housing
	Funding	HOME: \$1,138,883 CDBG: \$150,000 General Fund: \$5,997,000
	Description	Funding of the development/production of affordable rental housing.
	Target Date	6/30/2019
	Estimate the number and type of families that will benefit from the proposed activities	Approximately 450 households earning below 60% AMI, some earning well below 60% AMI, will benefit from the proposed activities. CHDO: \$162,772
	Location Description	Affordable rental housing in locations consistent with the City's Housing Location Policy.
	Planned Activities	
	Project Name	HESG - 18/19

12	Target Area	CITYWIDE
	Goals Supported	Enhance the homeless to housing continuum
	Needs Addressed	Homelessness to Housing Continuum
	Funding	ESG: \$256,647
	Description	HESG funds will be used to: (1) provide Homelessness Prevention assistance to individuals and families at-risk of homelessness; and (2) provides funds to support the HMIS for the CoC area.
	Target Date	6/30/2019
	Estimate the number and type of families that will benefit from the proposed activities	1. Approximately 40 households that are at-risk of homelessness will be prevented from becoming homeless and will still be stably housed 6 months after initial contact. 2. Funds will be used to support the CoC wide HMIS.
	Location Description	N.A.
	Planned Activities	HMIS: \$72,000 for the Raleigh Wake Partnership to End and Prevent Homelessness (the CoC) to cover a portion of HMIS costs that would otherwise be paid by providers. Homelessness Prevention: \$75,000 will be provided to Passage Home. \$109,647 will be provided to Triangle Family Services (TFS).
13	Project Name	Economic Development - CDBG 18/19
	Target Area	COLLEGE PARK
	Goals Supported	Neighborhood revitalization
	Needs Addressed	Neighborhood Revitalization
	Funding	CDBG: \$0
	Description	CDBG to be used in NRSA through existing City economic development programs to address commercial blight and assist businesses with interior improvements.
	Target Date	6/30/2019
	Estimate the number and type of families that will benefit from the proposed activities	Facade Grants (\$50,000): Benefit will be blight removal. FY 2017-2018 funds available. BUG (\$50,000): Job creation. FY 2017-2018 funds available.
	Location Description	College Park NRSA
	Planned Activities	Facade Grant: Grants to business operators within the NRSA only for façade renovations. BUG: Assistance to business operators within the NRSA for up-fit.

Geographic Distribution

Describe the geographic areas of the entitlement (including areas of low-income and minority concentration)

where assistance will be directed.

East College Park is a redevelopment area in which the City has nearly completed the largest infrastructure project ever implemented by the City with primarily CDBG resources. The \$5 million+ construction project began in spring 2016 and no new funds are needed in FY 2018-2019, where the City will focus on infill housing made possible by previous investments. Next year smaller sites outside of South Park and College Park (and thus labeled “citywide”) will require a small portion of the City’s CDBG resources. South Park/Garner Road is the focus area of City redevelopment during the last two of the five-year term of the Consolidated Plan.

Geographic Distribution Table

Target Area	Percentage of Funds
SOUTH PARK REDEVELOPMENT AREA	1%
CITYWIDE	97%
COLLEGE PARK	2%

Table 10 - Geographic Distribution**Rationale for the priorities for allocating investments geographically**

Raleigh has used redevelopment areas historically to allocate CDBG for neighborhood revitalization purposes since the start of its CDBG entitlement status. They are areas that qualify as “blighted” under state law. In more recent years greater percentages of CD’s budget is allocated to affordable apartment development which may occur many places within the City so “Citywide” has grown as a percentage of geographic distribution in recent years, including next year, it is anticipated.

Discussion

The City of Raleigh has been successful in its geographic allocation of housing and community development investments. Private investment in those areas that the City has concentrated CDBG and other resources are evidence of the aforementioned success. Over the years, the City has removed blight and created new affordable housing opportunities in these areas due to the socio-economic conditions. However, those conditions have now begun to change, therefore; as a result the Citywide category has grown in the geographic distribution table.

Affordable Housing**One-year Goals for Affordable Housing Table**

One Year Goals for the Number of Households to be Supported	
Homeless	20
Non-Homeless	60
Special-Needs	0
Total	80

Table 11 - One Year Goals for Affordable Housing by Support Requirement

One Year Goals for the Number of Households Supported Through	
Rental Assistance	60
The Production of New Units	450
Rehab of Existing Units	50
Acquisition of Existing Units	1

One Year Goals for the Number of Households Supported Through	
Total	561

Table 12 - One Year Goals for Affordable Housing by Support Type

The one year goals for homeless persons to be supported include the number of persons to be served through rapid re-housing. The goal for non-homeless is the number of persons to be supported through homelessness prevention. Special needs housing estimates are the number of units anticipated to be developed for special needs populations based on an average of what the City has completed over the past 5 years.

The number of households supported through rental/financial assistance is an estimate of households assisted through rapid re-housing (20 households) and homelessness prevention (40 households). The production of units and rehabilitation of existing units are based on averages of what has been done in the past 5 years. The rehabilitation of existing units also includes the estimates for homeowner rehabilitation (total of 50 units).

Raleigh Public Housing

What are the actions planned during the next year to address the needs to public housing?

Budgetary cuts on the federal level directly impact RHA. The ability to serve the many families in need of subsidized housing depends on federal appropriations. Without new development of public housing, the agency operates its waiting lists with a one-in, one-out process. A family has to first vacate before a new family can receive rental assistance. The wait time for public housing is approximately two to three years, depending on family size and need. Persons can apply individually for each of the subsidized housing waiting list options depending on their community preferences. On May 1, 2018 Raleigh Housing Authority will implement HUD's smoke-free housing health initiative throughout our public housing portfolio. The Raleigh Housing Authority (RHA) continues to maintain and improve its public housing properties.

RHA receives HUD funding through the Capital Fund Program (CFP) to assist with unit modernization, development, and maintenance costs of public housing units community-wide. The following work items are either underway or recently completed:

- Continued installation of security cameras throughout sites as needs are identified
- Roof replacement for 100 public housing units.
- Replacement of outdated plumbing in a 60 unit development as units are turned during vacancies.
- Asbestos abatement portfolio wide.
- Installation of backflow preventers at 3 sites
- Installation of new luxury vinyl-plank flooring during vacancy turns.
- Planned roof removal and replacement at 14 story senior building Glenwood Towers.
- Exterior caulking replacement and waterproofing at Glenwood Towers.
- Emergency Façade Repair at Glenwood Towers
- Planning new fire alarm system installation at Carriage House
- Planning Lentil Repair and Replacement as well as additional securing of façade at Glenwood Towers
- Planning repaving of private roads and parking at two developments

- Planning abatement and new flooring of first floor common areas at Glenwood Towers and Carriage House
- Smoke and CO detectors upgraded/replaced at 7 developments
- Lead Based Paint testing at all pre-1978 multifamily developments

What are the actions planned to encourage public housing residents to become more involved in management and participate in homeownership?

Raleigh Housing Authority recognizes the benefit of having its residents become self-sufficient. Opportunities to achieve this are shared and promoted. Such programming as:

a. **Homeownership:** As part of the Incentive Housing program, RHA has 108 single family homes scattered around the City of Raleigh. The families that rent these units are required to attend and complete home buyer's training classes. RHA continues to offer or provide referrals to workshops on money management and homebuyer education to assist in future home ownership. This program works with families to establish and/or improve credit, save for down payments, shop for financing, and select houses. The residents of this program have a ten year rental program opportunity to prepare and achieve their goals. The public housing family will have to purchase a home of their choice.

b. **Supportive Services:** RHA has developed Memoranda of Understanding with several community partners in order to better service the needs of families of public housing. Communities In Schools of Wake County (CIS Wake) continues to be a crucial partner in the delivery of services in public housing. CIS Wake operates after-school and summer programs in several public housing communities. The children attend these centers at no cost to their families and receive one-on-one tutorial assistance. In partnership with AT&T and Google Fiber, free internet service and digital literacy class are offered in some of the public housing communities. Partnerships such as these provide a plethora of resources and benefits to residents that would otherwise not be possible due to lack of additional funding for supportive services.

c. **Community Involvement:** RHA continues to coordinate services with other agencies in the Raleigh area including the Police Department, City Inspections, Community Development, and the Parks and Recreation Department. In addition to the CIS centers, RHA provides space to a daycare center, Meals on Wheels, Inter-Project Council office, St. Saviour's Outreach Center, and historic treasure Arts Together. The RHA staff is actively involved with coordination of programs with many community agencies including Wake County Human Services, Wake Technical Community College, Communities-In Schools of Wake County, Inter-act and the Support Circle offered through Catholic Charities. The faith community is involved in the public housing communities with many churches taking an active role in programs in various communities.

If the Housing Authority is designated as troubled, describe the manner in which financial assistance Annual Action Plan 2018-2019 will be provided or other assistance.

The Raleigh Housing Authority continues to be rated as a high performer by the U. S. Department of Housing and Urban Development's management assessment system [RHA scored](#) for public housing. RHA's Housing Choice Voucher program maintains high usage percentages and is also highly rated by HUD. RHA anticipates a significant decrease in the funding available to the agency due in large part to changes implemented by the U. S. Department of Housing and Urban Development. Despite this fact, RHA remains committed to its mission to provide safe, quality,

affordable housing to low and moderate income families in the greater Raleigh community; and to promote personal responsibility and self-sufficiency of residents while maintaining the fiscal integrity of the agency.

Discussion

As a federally-funded agency, RHA is impacted by budget decisions made on the federal level. Currently, RHA continues to deal with declining funding levels. HUD continues to provide guidance that funding for public housing will never return to 100% of eligibility. Housing authorities are encouraged to find alternative means for modernizing and funding the operations of public housing that depend less on federal operating subsidies. RHA has been considering its various options for lessening its dependence on federal subsidies and is investigating other options to preserve and enhance its affordable housing inventory. RHA works locally with supportive services and agencies to promote work and personal responsibility which will provide a pathway to financial stability and self-sufficiency to those we serve. RHA will continue to maintain this quality portfolio of affordable housing in a time of proposed changes to regulations and declining federal funding.

Homeless and Other Special Needs Activities

The information in this section discusses the current state of homeless services in Raleigh and Wake County as well activities that the jurisdictions and the Continuum of Care (CoC) are working toward. All partners are working toward full incorporation of HEARTH fundamentals in service delivery to homeless households and consistent services and programs across the CoC.

Describe the City of Raleigh's one-year goals and actions for reducing and ending homelessness including reaching out to homeless persons (especially unsheltered persons) and assessing their individual needs.

Outreach to homeless persons is done in a variety of ways:

1. The Raleigh/Wake Partnership to End and Prevent Homelessness (the CoC), the Continuum of Care for Raleigh and Wake County, operates the Oak City Outreach Center with Catholic Charities. This City-owned center provides free, warm meals to persons in need on Saturday and Sunday and selected holidays. Over 300,000 meals have been served at the Center since June 2015 to an average of 340 unduplicated individuals every weekend. Approximately 60% of persons served at Oak City Outreach Center are homeless. Catholic Charities coordinates the 70 organizations that distribute food and other services at the center.

The Oak City Outreach Center is a temporary location for providing weekend services and outreach to homeless and other persons in need. The City of Raleigh, Wake County, Catholic Charities and the CoC are working together to create a permanent place, to be called the Oak City Center, which will be an access point in the communitywide Coordinated Entry System, offering a variety of homeless and housing services, training, basic health services, showers, etc. in addition to meals on weekends for homeless persons. A location for the Oak City Center was acquired by Wake County March 29, 2017 next to the South Wilmington Street Center, the homeless shelter owned and operated by the County. Catholic Charities and the Partnership are working on determining the services to be offered on site along with Coordinated Entry. Catholic Charities will operate the center. The proposed physical structure for the delivery of these services and functions is in the process of being developed by the County and LS3P architects, with input from the City, the CoC, and Catholic Charities. The County and City will be the primary funding sources for the acquisition and construction of the new Center.

2. Wake County Human Services' McKinney Team offers behavioral health support to persons who are mentally ill and homeless. Through a HUD grant, the team provides outreach, assessment, assistance with housing access and

on-going support to maintain housing through medication management, therapy, and case management.

3. Wake County Human Services operates Cornerstone, a day shelter for persons who are homeless. Cornerstone provides case management, counseling services, food, showers, laundry services, employment services, mental health assessment, and medication management services. Cornerstone works with clients on progressive engagement and assists those who want to become housed to access housing, either through the Permanent Supportive housing program or other housing programs.

4. The South Wilmington Street Center, a men's shelter run by Wake County Human Services offers emergency beds to men through a lottery system. Staff encourages men who use the lottery system to become part of the housing program at the shelter. If men decide to become part of the housing program, they are guaranteed to have a bed each night as they work toward permanent housing. The City contributes \$100,000 annually toward the operations of the shelter.

How will the City of Raleigh address emergency shelter and transitional housing needs of homeless persons?

1. The City of Raleigh, Wake County and the CoC release a Combined Request for Proposals to fund ESG-eligible activities, such as Homelessness Prevention, Emergency Shelter, Rapid Re-housing, and HMIS. The RFP is for the Continuum of Care (CoC)-wide distribution of City ESG entitlement funds, local County funds for homeless housing services, and the annual application for State ESG funds, which is coordinated by the Partnership. This combined RFP process streamlines the application process for providers, the contracting and reimbursement process for funders and providers and enables the CoC to provide consistent services to consumers, working toward a seamless safety net for households who are homeless and at-risk of becoming homeless. The City, County, and Partnership meet regularly and continue to work with grant recipients helping them adapt to this more coordinated approach.

2. There is a great need in the Raleigh/Wake Continuum of Care for additional shelter beds for single women. There are typically 25-30 women on a given night that are not sheltered. We have seen a steady increase in the number of homeless, single women in our community. There is thought to be a need for an additional 25 to 30 beds.

How will the City of Raleigh address homeless persons (especially chronically homeless individuals and families, families with children, veterans and their families, and unaccompanied youth) make the transition to permanent housing and independent living?

1. In 2015, the City of Raleigh, Wake County and the Partnership formed a partnership for the funding of ESG-eligible activities. The second 2-year Combined RFP was issued in November 2016 and will begin July 1, 2017 for the City and County, and January 1, 2018 for the state. The Combined Request for Proposals fund the following ESG-eligible activities: Homelessness Prevention, Emergency Shelter, Rapid Re-housing, and HMIS. The RFP is for the CoC-wide distribution of City ESG entitlement funds, local County funds for homeless housing services, and the annual application for State ESG funds, which is coordinated by the Partnership. This combined funding process streamlines the process and enables the CoC to provide consistent services according to written, adopted communitywide standards to consumers, working toward seamless safety net for households who are homeless and at-risk of becoming homeless. The City, County, and CoC meet regularly and continue to work with grant recipients helping them adapt to this more coordinated approach.

2. Shortening shelter stays: The combined funding now requires that all shelter providers have at least one MOU with a Rapid Re-Housing provider. These purposeful connections will result in a decrease of the number of days of an average shelter stay. Rapid Re-Housing programs are expected to operate on a Housing First model, which should eventually result in shorter stays at shelters and decrease barriers for access into Rapid Re-Housing programs and permanent housing. The communitywide standard is now no more than 45 days in shelter before being

rehoused.

3. One of the three priorities of the City of Raleigh Consolidated Plan is “Enhance the Homeless to Shelter Continuum.” One of the ways expected to achieve this is through increasing the production of affordable and permanent supportive housing. Additional affordable and permanent supportive housing will make more units available to the overall population, but will make more units available to persons in rapid re-housing programs.

How will the City of Raleigh help low-income individuals and families avoid becoming homeless?

The combined Request for Proposals (RFP) discussed above has a strong focus on Homelessness Prevention. For FY 2018-19, the City will fund homeless prevention and HMIS.

In addition, the City of Raleigh works to prevent low-income individuals and families from becoming homeless in various ways. Efforts include:

- Providing CDBG-funded public service grants to nonprofits that provide services to homeless subpopulations.
- City support for Support Circles, managed by Catholic Charities
- City admin support for Passage Home, which works to find housing for ex-offenders and also has a program focus on homeless veterans.
- City grant funding for The Hope Center at Pullen which handles homelessness prevention for youth and young adults being discharged from foster care.
- Contracts with Homeless Prevention providers for funding and case management
- Ready to Rent Sessions to teach people how to maintain tenancy
- Partnerships with community agencies that provide case management, budget counseling, employment training, and financial assistance to help households who are at risk of homelessness to avoid becoming homeless.
- Homebuyer counseling and training for potential first time homebuyers.

To help people avoid becoming homeless after being discharged from a publicly funded institution or system of care, Alliance Behavioral Healthcare assures that services are provided to persons who are being discharged from mental health care facilities.

Discussion

The City of Raleigh, Wake County and the CoC are working closely together to address homelessness in our community and region. The actions outlined above are designed to improve the movement of homeless citizens from shelter to stable, permanent housing; reduce the length of time individuals and families are homeless; create a communitywide coordinated intake / assessment process; establish a shared tool for establishing a communitywide list of prioritized persons for permanent supportive housing; and to reduce the average number of nights spent by

anyone at a shelter before being housed. The goal is to make homelessness rare, brief, and nonrecurring.

Barriers to Affordable Housing

The influx of new, highly-paid employees to the City's new and expanding businesses, as well as the steady or declining federal commitment to housing programs, contribute to a reduced ability of lower-income residents to compete for available apartments and houses. In North Carolina cities are limited in their ability to enact innovative solutions to address housing affordability issues through local ordinances and policies.

Other Actions

Actions planned to address obstacles to meeting underserved needs

The current Raleigh City Council has affordable housing as one of its top priorities included in its strategic plan. New housing programs being developed will be aimed at increasing outputs in units rehabilitated or built, primarily with City funding approved by City Council as part of the City's budget process each Spring. Particular priority will be given in areas currently lacking affordable housing or in older neighborhoods within neighborhood revitalization strategy areas. A new Affordable Housing Implementation Plan was adopted in 2015 to guide these investments. The City is now providing over \$5.9 million per year toward increasing the supply of affordable rental units and homeowner rehab loans.

Actions planned to foster and maintain affordable housing

New housing programs developed in recent years are aimed at increasing outputs in affordable units rehabilitated or built, using General Fund and other forms of state and federal funding. Particular priority will be given in areas currently lacking affordable housing or in older neighborhoods within neighborhood revitalization strategy areas. An Affordable Housing Implementation Plan and Housing Location Policy in 2015/2016 were created to guide these investments.

Actions planned to reduce lead-based paint hazards

LBP remediation is an integral part of CD's rehab program. All rehabs of owner-occupied homes are tested for lead-based paint and any LBP found is appropriately remediated.

Actions planned to reduce the number of poverty-level families

The City has repurposed its Small Business and Technology Center (now The Pathways Center) to reach out to entrepreneurs in need of incubator space and technical assistance. Community Development helps create job opportunities for nearby residents of the East College Park infill housing site. Job fairs are being held within the College Park neighborhood and firms contracted to install utility lines and build new housing will continue to participate in hiring low-income and area residents.

Actions planned to develop institutional structure

Efforts have been taken to create efficiencies through collaboration between funding sources, such as the combined RFP for ESG funds (City, County, and CoC). Additional actions will include the implementation of the coordinated assessment and multiservice center for the homeless, which includes a partnership among the City, County, CoC organization, and Catholic Charities. These actions alone constitute a significant step forward in enhancing

institutional structure for the improved delivery of services to the most vulnerable members of our community.

Actions planned to enhance coordination between public and private housing and social service agencies

The City is collaborating with the Partnership to End and Prevent Homelessness (local CoC) and Catholic Charities to build on the success of its Oak City Outreach Center (located on City land downtown) and Wake County to develop a multi-purpose center (Oak City Center) to serve the homeless population. Recent City land sale Requests for Proposals feature scoring criteria seeking creative use of City land to include social services within City-sponsored rental housing development (e.g., Sawyer Road).

Discussion

The City of Raleigh has long-term partnerships with the Raleigh Housing Authority, Wake County, and most recently with the Partnership in addressing needs that do not stop at the municipal border. In the next three years the coordination will include significant investments in joint funding for supportive housing development, land, construction of a building, and (possibly) vans for transporting homeless persons to existing resources and operational support.

Program Specific Requirements

The city uses HOME and CDBG for a variety of housing and community development social services. ESG is used for shelter operations, homelessness prevention, and rapid rehousing. This section shows information on program specific requirements for the Community Development Block Grant, HOME, and Emergency Solutions Grant (ESG).

Community Development Block Grant Program (CDBG)

Projects planned with all CDBG funds expected to be available during the year are identified in the Projects Table. The following identifies program income that is available for use that is included in projects to be carried out.

1. The total amount of program income that will have been received before the start of the next program year and that has not yet been reprogrammed	850,000
2. The amount of proceeds from section 108 loan guarantees that will be used during the year to address the priority needs and specific objectives identified in the grantee's strategic plan.	0
3. The amount of surplus funds from urban renewal settlements	0
4. The amount of any grant funds returned to the line of credit for which the planned use has not been included in a prior statement or plan	21,652
5. The amount of income from float-funded activities	0
Total Program Income:	871,652

Other CDBG Requirements

1. The amount of urgent need activities	0
2. The estimated percentage of CDBG funds that will be used for activities that benefit persons of low and moderate income. Overall Benefit - A consecutive period of one, two or three years may be used to determine that a minimum overall benefit of 70% of CDBG funds is used to benefit persons of low and moderate income. Specify the years covered that include this Annual Action Plan.	99.00%

HOME Investment Partnership Program (HOME)

1. A description of other forms of investment being used beyond:

The City of Raleigh uses HOME funds to assist existing owner-occupants with the rehabilitation of their homes, to finance the acquisition of homes for homebuyers by providing down payment and closing cost assistance and/or gap financing, and to assist developers with the acquisition, new construction, or rehabilitation of affordable rental housing. The City of Raleigh invests these HOME funds as interest- and non-interest bearing loans and deferred payment loans, both forgivable and non-forgivable.

2. A description of the guidelines that will be used for resale or recapture of HOME funds when used for homebuyer activities:

The City of Raleigh uses the recapture provision to secure long-term affordability. Under this mechanism, the City of Raleigh recaptures a portion of the direct subsidy if the HOME recipient sells the house within the 20-year loan term, which is 10 years beyond the required affordability period. The recipient's HOME direct subsidy is discounted (reduced) 25% on the fifth, tenth, and fifteenth anniversary of the Note and then forgiven in its entirety at 20 years. The City of Raleigh also has a provision for excess proceeds and shared appreciation. Both provisions are outlined in the HOME agreement with the HOME recipient and in Deed Restrictions.

3. A description of the guidelines for resale or recapture that ensures the affordability of units acquired with HOME funds?:

The recipient of a direct HOME subsidy is required to execute a HOME written agreement, which explains the recapture provision as well as the excess proceeds and shared appreciation provision, prior to sale. Furthermore, deed restrictions that run with the land are recorded to enforce the provisions.

4. Plans for using HOME funds to refinance existing debt secured by multifamily housing that is rehabilitated with HOME funds:

The City of Raleigh does not use HOME funds to refinance existing debt on a property.

Emergency Solutions Grant (ESG)

1. Include written standards for providing ESG assistance (may include as attachment)

See Attachment "ESG Written Standards," *Coordinated Entry System Policies and Procedures Manual*. (in PDF)

2. If the Continuum of Care has established centralized or coordinated assessment system that meets HUD requirements, describe that centralized or coordinated assessment system.

The CoC partnered with the City, the County, Catholic Charities of the Diocese of Raleigh, and the homeless service provider community to develop the *Coordinated Entry System Policies and Procedures Manual*, a communitywide coordinated entry system for NC 507 submitted to HUD January 23, 2018. The CoC hired a consultant, OrgCode, to facilitate the community process that produced the *Manual*. County and City staff were actively involved in this effort. A new staff position for the CoC has been filled, paid for in part by a HUD planning grant, to do data analysis and administrative support for the Executive Director and the CoC generally to assist with this process. Service providers were involved in developing the system, so there is a broad consensus among providers about the purpose and use value of the *Manual*, including the choice of access points and the use of the Vi-SPDAT as the common assessment tool.

The *Manual* is currently being reviewed by the Quality Improvement Committee (QI), a committee of service

providers who are actively involved in implementing the *Manual*. The staff from the service providers who work on this committee are licensed users of HMIS and use the Vi-SPDAT as the assessment tool to determine acuity for the by-name list. The QI committee meets weekly to share experience and discuss possible revisions to the *Manual* based on their experience. This improvement process is expected to continue through the end of March 2018 at which time the written standards will become final and the by-name list will become active. From that point on, revisions will be made to the *Manual* annually.

Other meetings of service providers continue, as well, to make ongoing improvements to the coordinated entry system:

1. The CoC facilitates the NOFA process with homeless services within NC 507, the official designation for the CoC (Partnership to End and Prevent Homelessness).
2. Regular biweekly meetings of all agencies providing rapid re-housing and/or prevention services are held to coordinate how issues are addressed in a consistent way across all agencies as they arise.
3. A formal partnership was formed between the CoC, the City, the County, and Catholic Charities to develop the Oak City Center, a new access point for coordinating entry, while also providing a variety of services, housing options, and training opportunities for homeless individuals and families. Weekend food distribution by approximately 70 volunteer organizations will also continue at the new center after construction is complete. Anticipated completion date for the new Oak City Center is February 2019.

3. Identify the process for making sub-awards and describe how the ESG allocation available to private nonprofit organizations (including community and faith-based organizations).

The City of Raleigh, beginning July 1, 2015, conducted a “Combined Request for Proposals (RFP)” with the County and CoC. This change increased efficiency, reduced administrative burdens on the homeless service providers, and increased standardized practice among homeless service providers communitywide. For example, since July 1, 2015, all agencies funded via the Combined RFP have been required to use HMIS. Contracts have been awarded as 2-year contracts, as noted in the RFP. For the providers that met performance metrics at the end of the first year, as specified in their contract, contracts were extended for the second year using new ESG allocations, which were distributed proportionally among the subgrantees based on their first year award.

A new combined RFP is issued every two years. The second Combined RFP was issued at the end of 2016 for the period July 1, 2017—June 30, 2019. For the fiscal year beginning July 1, 2018, the current ESG contracts (Triangle Family Services and Passage Home for Homelessness Prevention and the CoC for HMIS) will be extended for another year with the City’s entitlement ESG funds for that fiscal year.

4. If the jurisdiction is unable to meet the homeless participation requirement in 24 CFR 576.405(a), the jurisdiction must specify its plan for reaching out to and consulting with homeless or formerly homeless individuals in considering policies and funding decisions regarding facilities and services funded under ESG.

The Raleigh/Wake Partnership to End and Prevent Homelessness (the Partnership) is the Continuum of Care organization in Wake County. The Partnership is a 501(c)3. The Partnership’s Bylaws reserve a few seats on the Board, one of which is for an individual who is currently or has in the past experienced homelessness. For the past two years, the seat has been held by Wilbur Davis, a formerly homeless gentleman currently living in Glenwood Towers, a Raleigh Housing Authority development for seniors. Mr. Davis is in his second two-year term on the Board that began July 1, 2017.

5. Describe performance standards for evaluating ESG.

For Rapid Re-Housing

- Number/percentage of households re-housed
- Number/percentage of households maintaining stable housing for 12 month period.

For Prevention

- Number of households entered into the prevention program
- Number/percentage of households prevented from becoming homeless
- Percentage maintaining stable housing for 12 months

For Shelter

- Percentage of daily bed utilization
- Number placed in permanent housing who remain self-sufficient for at least six months

Citizen Participation Comments

ANNUAL ACTION PLAN – 2018-19 – December 5, 2017 PUBLIC HEARING – COMMENTS RECEIVED

It was pointed out the US Department of Housing and Urban Development requires entitlement communities under the Community Development Block Grant, HOME Investment Partnership and Emergency Solutions Grant programs to hold two public hearings annually. This is the first public hearing at the beginning of the process associated with the preparation of the five-year Consolidated Plan or Annual Action Plan to obtain citizens' views on housing and community development needs including priority non-housing community needs.

Recommendation: At the conclusion of the public hearing the Council may choose to act on the request, refer to committee or defer for future discussion.

Niki Jones, Housing and Neighborhoods, provided a brief description of what the Annual Action Plan is all about stating it is simply the application to the U.S. Department of Housing and Urban Development for entitlement funding, provides a framework for annual strategic and production goals, and explained each annual action plan is tied directly to the five-year Consolidated Plan and FY2018-19 is the fourth year of the Consolidated Plan.

Mr. Jones went through what has happened to date as it relates to the annual plan indicating since November 2017 there have been three public meetings (Method Road/Brentwood Road and Chavis Park) to get input on what the community wants to see in their area. The hearing tonight is the needs public hearing which is mandated by the Federal government. On January 8, 2018, the Community Enhancement Grant applications are due. There will be a 30-day public comment period, draft plan meetings, draft plan public hearing between March and April of 2018 pointing out the Annual Action Plan is due to HUD in May 2018.

Mr. Jones went over the funding sources CDBG (\$3M); HOME (\$2M); Emergency Solutions Grant (\$255,000); Affordable Housing Trust Fund (Penny), (\$5,900,000); and other funds (\$500,000) for a total of \$11,655,000.

Mr. Jones went over the eligible activities established in the consolidated plan breaking down what activities are eligible under the CDBG, HOME and ESG.

Mayor McFarlane questioned the impact the proposed Federal budget would have on the City's housing programs. Mr. Jones pointed out the funding was received very late this year. He stated we do not know exactly what will occur as we do not know what will be in the tax bill. He talked about the 4% and 9% tax credit and which are in which proposal. Mayor McFarlane questioned if we lose the 4% tax credit what the impact will be on our programs with Mr. Jones pointing out it will have a huge negative impact. He talked about looking at the Penny funds and how to reallocate; might have to look at different methods such as acquisition of affordable housing buildings or constructing something ourselves. Council Member Branch questioned when tax credits are committed but not approved by the State agency what happens to the money. Mr. Jones pointed out if the developer does not get the state funding, then the money goes back into the pot. Council Member Stephenson

talked about synesthetic TIF and questioned that possibility if the funding goes away. Mr. Jones pointed out that has been looked at, talked about how Ashville addresses the situation, talked about coordination with the Wake County Affordable Housing Task Force recommendations, etc.

Mayor McFarlane opened the hearing.

Warren Mohammad, Garner Road, indicated he attended two of the three meetings that have been held and questioned if there have been any reports from those meetings. He asked someone to define “affordable housing” questioning if it is for someone who can afford a \$250,000 house or affordable housing means someone with a very low income who really needs housing. Mayor McFarlane talked about the different affordable housing programs and which provides what, touching on low income, disabilities, social services, work force housing, etc.

Wanda Hunter, 1321 Raleigh Boulevard, questioned what the city does anything to prevent homelessness. She talked about the 4% and 9% tax credits that owners or developers get because they make a lot of promises as to what they are going to do but they never follow through. She questioned the City’s system of checks and balances. She again talked about how developers come in, get the tax credits, sell the units to someone else and no improvements ever happen. City Manager Hall indicated each tax credit project goes through a selection process and a formal contract is entered into with the selected contractors. He stated if the developer cannot meet their obligations they cannot proceed with the project and do not get the tax credits. He stated the contracts are very substantial as they include Federal regulatory requirements, city requirements, etc. Ms. Hunter indicated Mr. Jones had said there are no checks and balances for the projects and referred to concerns about Raleigh North where the properties change hands repeatedly, nothing has ever been rehabilitated and the developers walk away with the tax credit. She questioned what the City can do or will do to provide additional checks and balances so millionaires cannot continue to come into Raleigh, take the tax credits and exploit Raleigh citizens who just want a house over their head.

Kimberly Muktarian indicated she had discussed with several police officers about coming and living in their neighborhood but they cannot afford the new housing. She talked about the need to have a program to bring citizens and officers together. Have housing where they can live next to each other, let them get to know each other and work together. She called on the city to consider tax credit for officers who live in the neighborhoods. She stated they would like to see diversity in culture and profession and any activities that bonds everyone together, the police, the neighborhood, etc. She stated if everyone works together it makes it impossible and less likely that there is fear in the neighborhood.

Rolanda Byrd, 2326 Glascock Street, indicated at the swearing in ceremony the Mayor said the City of Raleigh is the greatest place in the world to live. She stated however the speakers at tonight’s meeting say differently. She pointed out she is from Southeast Raleigh and she, her kids and grandkids have had to live in low income housing. She stated many times they bring issues before the Council and the Council seems unfair and uneven in what topics they will respond to, they respond to some issues and other issues they just sit and listen. She pointed out the Mayor said she would be open to community engagement equity and

transparency but what has been shown tonight is not transparent. The Council discriminates against issues that are brought before them like housing.

She stated when PACT and other groups such as that come before the Council they can look at the Council faces and see the anger and the Council does not respond to their issues. She indicated the Council discriminates against issues brought before it and when the Council says they want to be held accountable she wants to make sure that the Council talks about everyone not just people who have just moved into the area or people who do not look like the Council.

Jeff Woodhead, Bedford Avenue, stated he attended the Chavis Park meeting and one project that he discussed with Mr. Jones after the meeting was East College Park where the Council made the decision to build 9 houses for purchase rather than 30 something rental units. The for sale/purchase units were built. He stated if we are in a situation where many people need affordable housing, the choice to build less housing is not necessarily wise and asked if the Council would explain. Mayor McFarlane pointed out in that case, the people of the neighborhood came before the Council and asked to maintain the character of their neighborhoods and build only single-family homes. The City representatives explained that the units would be higher priced and there would be many less units but the neighborhood residents said they wanted single-family housing.

Barbara Smalley-McMahan, 602 North Bloodworth Street, talked about the poem she read earlier pointing out it applies to affordable housing just like it applies to PACT. She stated she had heard the Mayor speak about her decision to run because she loves the City of Raleigh and she feels we should love all of the citizens. She asked the Council to serve the people, start at the bottom where people are living in substandard houses, do something to keep kids from being shot on the streets or taken out of schools and treated unlike other kids because of their color. Mayor McFarlane asked Ms. Smalley-McMann to speak to the issue.

Stephanie Lormand talked about black owned businesses and questioned if the nonprofit organizations are serving the black community. She questioned if Catholic Charities is the best group to serve Southeast Raleigh, talked about the value of the neighborhoods, South Park, putting chemical plants next to residences and questioned how the City can make sure that funds are going to black businesses. She talked about RADA, black owned businesses, and the Human Relations Commission's work with the nonprofits, etc. Mayor McFarlane suggested they talk with the Human Relations Commission which has a grants committee that makes recommendation on awarding grants for nonprofits with Ms. Lormand pointing out she had talked to them and had concerns.

Council Member Branch talked about conversations he had with Ms. Lormand about black owned businesses and black nonprofits applying for grants and programs. He talked about the process which is an open process, applications are being accepted right now and talked about who qualifies with discussion following about the group concerned about who owns a business rather than who it serves. No one else asked to be heard thus the hearing was closed.

Mr. Jones indicated all of the comments will go into the draft plan; however, he would try to respond to some of the comments. He pointed out affordable housing initiatives are very emotional issues and the city is working really hard at solving an insurmountable challenge and some statutory challenges. If tax reform comes down the way we think it might, the City will have

to do some soul searching and determine “what is affordable.” He talked about 80% or more below average medium income and the various levels that we look at, tax credits for developers, having contracts to ensure that they do what they say they will do, Raleigh North Apartments, police officers living in neighborhoods being something the City has thought about and provide information in the City Manager’s update; black-owned businesses, evaluation criteria, serving specific populations, homeless prevention, partnering with Wake County and the Catholic Charities, data we use, paying more attention to nonprofits, people living in hotels and everything that is being done to address the issues. He talked about breaking ground on the outreach and intake center and what the city is doing to address the issues.

FY 2018-19 Annual Action Plan

Public Meetings

Questions asked/Comments made by participants

November 9, 2017, Method Community Center, 6:00—7:45 pm

- What’s happened to the people who have been relocated from where they lived? Where did they go? I’m thinking specifically of near Oakwood Neighborhood. The people I see moving in don’t look like the people who’ve been moved out.
- I see the area around Bragg Street and Branch Street going the same way.
- I’m concerned about affordable housing, like at East and Hargett: when will Winter Haven tenants go? Developers coming in, especially near downtown, buying places people can afford then putting up expensive apartments. What’s the City doing about it?
- Is there a role for the City to help keep housing affordable when landlords raise the rent?
- The City should take strong action against developers to ensure that a percentage of the units they build must be affordable.
- What do you call “affordable housing”?
- Does the City have a Landlord Rehab Program? For example, if I have property I want to use for affordable housing, what incentive does the City offer to encourage that?
- I get info on these meeting but I don’t see much of the public here. *(Of those present, several were reps of agencies that receive City grants/loans.)* Do you just use email?
- How can I get involved?
- CASA rep said they are interested in doing infill and recommended that the City create a set-aside of City funds specifically for preservation of naturally occurring affordable housing; the City should also continue supporting homelessness prevention.
- It would be a good idea to create a database of naturally occurring affordable housing that could be shared with affordable housing developers to help preserve them as affordable before they are purchased by high-end developers.
- It would be good to create a partnership with a service provider, like DHIC, to set aside funds to buy units for preservation.
- Interest in RHA’s draft plan. It is important that we know what their plans are for vouchers.

- Landlords are leery of taking RHA Section 8 vouchers because tenants aren't trained. RHA should create a tenant training program to train people the responsibilities expected of renters. Maybe landlords could subsidize that kind of training.

November 14, 2017, Brentwood, 6:00—7:45 pm

- When people get displaced where do they go to live? Need to minimize displacement and preserve neighborhoods
- People living in affordable housing and affordable neighborhoods need certain amenities to live comfortably.
- You break up these neighborhoods and the push for better schools goes out the window.
- Washington Terrace- will those people be able to stay?
 - Are People who are below 30% Area Median Income able to stay?
- Washington Terrace- 30 year affordability period expired: City needs to prevent "flipping"
- Why aren't we helping 30% and below?
- Not fixing problem, don't want to just put bandaids on problems
- Co-op housing could be a good option
- Should the City use money toward rent vouchers instead of building units?
- People should be able to get low-interest 30-year loans that corporations get
- RHA vouchers: need willing landlords to take them
 - What is done about appraisals?
- Predatory landlords were taking Section 8 vouchers years ago in South Park
 - The community needs to change their thinking on poor people and neighborhoods
- What has the City done policy-wise to affect consciousness of property owners (to keep their properties up)?
- Make available infill parcels in City core
 - Identify affordable housing preservation opportunities
 - Provide Emergency rental assistance
 - Create fund for apartment buildings that are about to be flipped
 - Maintain affordability of current tenants
 - Land for apartments is crucial
- Will the City still encourage mixed income owners in neighborhoods?
- We need more housing- big apartment buildings

November 16, 2017 Chavis Community Center 6:00—7:45 pm

- Raleigh's popularity as a place to live has also created an affordable housing problem and we want the City to address that
- Concerns about gentrification, investors buying up housing units and making residents homeless
- Developers should rehab apartments to make their spaces more livable
- There is a need for additional resources for affordable housing
- Inclusionary zoning would discourage building
- The issue is that we are just not building more housing and density – zoning may not be adequate

- Does the City make money off of 40% of homes (in East College Park) that are market rate homes? We sell the lots to affordable housing builders and market rate builders for the value of the vacant land (and the funds are recirculated into additional public investments in affordable housing) but the costs associated with creating those lots are never fully recaptured.
- City knows when an area is going to fall apart: “jump in” prior to its decline
- City statements about affordability should produce results
- Regret the loss of the city’s rental registry
- Zoning can add to cost of housing: zoning for low density creates McMansions
- Need more density and more units to bring prices down
- Creating “green” houses adds to initial cost for low-income buyers but monthly energy cost is lower

NC 507 Raleigh/Wake

Coordinated Entry System policies and Procedure Manual Written



NC- 507 Raleigh/Wake

Coordinated Entry System Policies and Procedures Manual

Coordinated Entry Overview

In 2017, the City of Raleigh/Wake County, North Carolina initiated a process to improve the delivery of housing and crisis response services and assistance people experiencing homelessness or at imminent risk of homelessness by refining the community's process for access, assessment, eligibility determination and referrals across the Continuum of Care.

This process, the **Coordinated Entry System**, institutes consistent and uniform access, assessment, prioritization, and referral processes to determine the most appropriate response to each person's immediate housing needs. Coordinated Entry is mandated by HUD and many other funders and is recognized nationally as a best practice which can improve efficiency within systems, provide clarity for people experiencing homelessness, and can help serve more people more quickly and efficiently with assistance targeted to address their housing needs.

This Coordinated Entry System Policies and Procedures document is an operational manual, providing guidance and direction for the day-to-day operation, management, oversight, and evaluation of Raleigh/Wake's coordinated entry approach. This manual will be updated and revised on an ongoing basis as the actual application and practical experience of Coordinated Entry System design principles are refined and improved.

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Introduction and Purpose

In July 2012, HUD published the new Continuum of Care (CoC) Program interim rule. The CoC Program interim rule requires that the CoC establish and consistently follow written standards for providing CoC assistance, in consultation with recipients of the Emergency Solutions Grant (ESG) program.

At a minimum, these written standards must include:

- Policies and procedures for evaluating eligibility for assistance in the CoC Program
- Policies and procedures for determining and prioritizing who will receive assistance for permanent supportive housing assistance, transitional housing assistance, and rapid re-housing assistance

The goals of the written standards are to:

- Establish community-wide expectations on the operations of projects within the community
- Ensure that the system is transparent to users and operators
- Establish a minimum set of standards and expectations in terms of the quality expected of projects
- Make the local priorities transparent to recipients and sub-recipients of funds
- Create consistency and coordination between recipients' and sub-recipients' projects within the CoC
- CoC Program standards must remain in compliance with Violence Against Women Act (VAWA) regulations

The Coordinated Entry System is Raleigh/Wake, North Carolina's approach to organizing and providing services and assistance to people experiencing a housing crisis throughout the Continuum of Care. Individuals or families who are experiencing a housing crisis are directed to defined entry points, assessed in a uniform and consistent manner, prioritized for housing and services, and then linked to available interventions in accordance with the intentional service strategy defined by CoC leadership. Each service participant's acuity level and housing needs are aligned with a set of service and program strategies that represent the appropriate intensity and scope of services needed to resolve the housing crisis.

Guiding Principles

The following access points have been identified to ensure equal access for all persons seeking support for a housing crisis to help both centralize and standardize connection to the most critical resources in our community, expediting permanent housing for people experiencing homelessness.

Phone: 919.861.1195

Website: <http://wake.nc.networkofcare.org>

Haven House Youth Services

600 West Cabarrus St.
Raleigh, NC 27603
919.833.3312

InterAct

1012 Oberlin Road
Raleigh, NC 27605
(919) 828-7501 (office)
919-828-7740 (24 Hour Crisis Line)

Durham Veteran Affairs Medical Center

508 Fulton Street
Durham, NC 27705
877.424.3838

Wake County Southern Regional Center

130 N. Judd Parkway NE
Fuquay-Varina, NC 27526
919.557.2501

Wake County Eastern Regional Center

1002 Dogwood Drive
Zebulon, NC 27597
919.404.3900

Dorcas Ministries

187 High House Road
Cary, NC 27511
919-469-9861 Ext. 203

The guiding principles for these access points include:

- **Housing First:** When an individual or family is homeless the service priority shall be to reconnect them with housing, and then to other services in the community which will help them maintain their housing. Other services may need to commence concurrently, but should not take precedence over housing.
- **Client-centered:** Based on the identified needs of the household we will focus on connecting them with community resources designed to achieve housing stability.
- **System-wide prioritization of limited supportive housing resources:** Our community has a limited number of moderate to intensive housing supports including rapid re-housing

slots, public housing units and vouchers, specialized housing vouchers for people experiencing homelessness and case management services.

Fair Housing, Tenant Selection and Other Statutory and Regulatory Requirements

All CoC projects in The Raleigh/Wake Coordinated Entry System must include a strategy to ensure CoC resources and Coordinated Entry System options (referral options) are eligible to all people regardless of race, color, national origin, religion, sex, age, familial status, disability, actual or perceived sexual orientation, gender identify, or marital status. Special outreach to people who might be or identify with one or more of these attributes ensures the Coordinated Entry System is accessible to all people.

All CoC projects in the Raleigh/Wake Coordinated Entry System must ensure that all people in different populations and subpopulations throughout the geographic area, including people experiencing chronic homelessness, veterans, families with children, youth, and survivors of domestic violence, have fair and equal access to the coordinated entry process, regardless of the location or method by which they access the crisis response system.

All CoC projects in the Raleigh/Wake Coordinated Entry System must document steps taken to ensure effective communication with people with disabilities. Access points must be accessible to people with disabilities, including physical locations for people who use wheelchairs, as well as people in Raleigh/Wake who are least likely to access homeless assistance.

Recipients and subrecipients of CoC Program and ESG Program-funded projects must comply with the nondiscrimination and equal opportunity provisions of Federal civil rights laws, including the following:

- A. Fair Housing Act prohibits discriminatory housing practices based on race, color, religion, sex, national origin, disability, or familial status.
- B. Section 504 of the Rehabilitation Act prohibits discrimination on the basis of disability under any program or activity receiving Federal financial assistance.
- C. Title VI of the Civil Rights Act prohibits discrimination on the basis of race, color, or national origin under any program or activity receiving Federal financial assistance.
- D. Title II of the Americans with Disabilities Act prohibits public entities, which includes State and local governments, and special purpose districts, from discriminating against individuals with disabilities in all their services, programs, and activities, which include housing, and housing related services such as housing search and referral assistance.
- E. Title III of the Americans with Disabilities Act prohibits private entities that own, lease, and operate places of public accommodation, which include shelters, social service establishments, and other public accommodations providing housing, from discriminating on the basis of disability.

All CoC and ESG funded projects must document steps taken to ensure effective communication with people with disabilities. Access points must be accessible to people with disabilities, including physical locations for people who use wheelchairs, as well as people who are least likely to access homeless assistance.

When the Access Site, assessment team identify gaps in services to any subpopulation of people, they will notify the CoC Quality Improvement Committee of these gaps in the system of care within the community. The Committee and CoC will be responsible for working with the local agencies and departments to address the gap in services and ensure that all residents of Wake County have access to appropriate services to address their housing crisis.

Right to Appeal

Consumer Appeals

Persons and/or households experiencing homelessness seeking to appeal decisions of the Coordinated Entry System must contact the Raleigh/Wake Partnership to End And Prevent Homelessness Coordinated Entry Supervisor and submit an official appeal, either verbally or in writing. The Coordinated Entry Supervisor will communicate directly with the head of household or designee regarding the appeal. Appeals will be initially directed to the Coordinated Entry Supervisor and will have five (5) business days to consult with the head of household or designee, review all applicable evidence, consult with professional parties involved (if applicable), and issue a formal decision in writing to the household. If the head of household or designee feels the issue remains unresolved, they may further appeal to the next level of oversight beginning with the Executive Director of the CoC, and, finally, an independent review committee of the CoC Board of Directors. Each level of appeal will comply with the timelines listed above and will issue a formal response in writing to the head of household or designee.

If appealed to the Coordinated Entry Supervisor, that decision will be considered final and binding (pending any extra legal and/or Federal appeal proper). A consumer not presently affiliated with a local project sponsor/agency but still appealing a Coordinated Entry decision (such as consumers served via street outreach) may file an appeal directly with Raleigh/Wake Partnership to End and Prevent Homelessness staff. The Raleigh/Wake Partnership to End and Prevent Homelessness will maintain and review records of all Coordinated Entry System (CES) appeals for at least 5 years, in compliance with HUD recordkeeping requirements. In its role as federal funding entity, HUD shall assume and maintain regulatory oversight regarding Coordinated Entry in matters of compliance.

Project-Level Appeals

All projects participating in the CES, whether as part of funding requirements or through voluntary participation, are required to have a project-level appeals policy and procedures in place, inclusive of the procedures for appeals and in accordance with HUD requirements of due process. All persons and/or households being screened for project admission must be provided information on their right to file an appeal and the process in which to do so. Households

contacting The Raleigh/Wake Partnership to End And Prevent Homelessness regarding project-level decisions will be directed to the specific program to address concerns and pursue appeals. Projects must fully comply with their project-level appeals process and notify The Raleigh/Wake Partnership to End and Prevent Homelessness, as CES lead, of any appeals related to the processing and acceptance of CES referrals. The Raleigh/Wake Partnership to End And Prevent Homelessness notification requirement only applies to the timeframe from referral receipt through processing and acceptance/denial of referrals, up to and including formal project entrance or referral closure. Projects must provide all appeal responses in writing to the head of household or designee and copy The Raleigh/Wake Partnership to End and Prevent Homelessness via email.

Coordinated Entry System Terms

Chronically Homeless (HUD Definition)

HUD defines a chronically homeless person as follows:

A person who:

1. Is homeless and lives in a place not meant for human habitation, a safe haven, or in an emergency shelter; and
 - a. Has been homeless and living or residing in a place not meant for human habitation, a safe haven, or in an emergency shelter continuously for at least one year or on at least four separate occasions in the last three years, where the cumulative total of the four occasions is at least one year. Stays in institutions of 90 days or less will not constitute a break in homelessness, but rather such stays are included in the cumulative total; and
 - b. Can be diagnosed with one or more of the following conditions: substance use disorder, serious mental illness, developmental disability (as defined in section 102 of the Developmental Disabilities Assistance Bill of Rights Act of 2000 (42 U.S.C. 15002)), post-traumatic stress disorder, cognitive impairments resulting from brain injury, or chronic physical illness or disability;
2. Has been residing in an institutional care facility, including a jail, substance abuse or mental health treatment facility, hospital, or other similar facility, for fewer than 90 days and met all the criteria in paragraph (1) of this definition, before entering that facility; or
3. Who meets all of the criteria in paragraph (1) of this definition.

Disability (HUD Definition)

HUD defines a person with disabilities as a person who:

1. has a disability as defined in Section 223 of the Social Security Act (42 U.S.C.423), or
2. is determined by HUD regulations to have a physical, mental, or emotional impairment that:
 - a. is expected to be of long, continued, and indefinite duration;
 - b. substantially impedes his or her ability to live independently; and
 - c. is of such a nature that more suitable housing conditions could improve such ability, or

3. has a developmental disability as defined in the Developmental Disabilities Assistance and Bill of Rights Act (42 U.S.C. 15002(8)), or
4. has the disease acquired immunodeficiency syndrome (AIDS) or any conditions arising from the etiologic agent for acquired immunodeficiency syndrome (HIV).

For qualifying for low income housing under HUD public housing and Section 8 programs, the definition does not include a person whose disability is based solely on any drug or alcohol dependence.

Literally Homeless (HUD Homeless Definition Category 1)

A person who lacks a fixed, regular, and adequate nighttime residence

- a. An individual with a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, including a car, park, abandoned building, bus or train station, airport, camping ground; or
- b. An individual living in a supervised publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, state, or local government program for low-income individual); or
- c. An individual who is exiting an institution where he or she resided for 90 days or less and who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution.

At imminent risk of homelessness (HUD Homeless Definition Category 2)

A person who will imminently lose their housing (within 14 days) and become literally homeless

Homeless under other Federal statutes (HUD Homeless Definition Category 3)

A person defined as "homeless" by other federal statute (e.g., Dept. of HHS, Dept. of Ed.)

Fleeing domestic abuse or violence (HUD Homeless Definition Category 4)

A person fleeing or attempting to flee domestic violence, stalking, dating violence, or sexual assault.

At Risk of Homelessness

1. Category 1: A person who:
 - a. has an annual income below 30% of median income for the area; AND
 - b. does not have sufficient resources or support networks immediately available to prevent them from moving to an emergency shelter or another place defined in Category 1 of the "homeless" definition; AND Meets one of the following conditions:
 - i. Has moved because of economic reasons 2 or more times during the 60 days immediately preceding the application for assistance; OR
 - ii. Is living in the home of another because of economic hardship; OR

- iii. Has been notified that their right to occupy their current housing or living situation will be terminated within 21 days after the date of application for assistance; OR
 - iv. Lives in a hotel or motel and the cost is not paid for by charitable organizations or by Federal, State, or local government programs for people with low-income; OR
 - v. Lives in an SRO or efficiency apartment unit in which there reside more than 2 persons or lives in a larger housing unit in which there reside more than one and a half persons per room; OR
 - vi. Is exiting a publicly funded institution or system of care; OR
 - vii. otherwise lives in housing that has characteristics associated with instability and an increased risk of homelessness, as identified in the recipient's approved consolidated plan.
2. Category 2: A child or youth who does not qualify as homeless under the homeless definition, but qualifies as homeless under another Federal statute
 3. Category 3: An unaccompanied youth who does not qualify as homeless under the homeless definition, but qualifies as homeless under section 725(2) of the McKinney-Vento Homeless Assistance Act, and the parent(s) or guardian(s) or that child or youth if living with him or her.

Homeless Management Information System (HMIS)

A Homeless Management Information System is an electronic web-based data collection and reporting tool designed to record and store person-level information on the characteristics and service needs of people experiencing homelessness throughout a Continuum of Care (CoC) jurisdiction. Usage of the HMIS is mandated by the U.S. Department of Housing and Urban Development (HUD) for any person experiencing homelessness.

Vulnerability Index – Service Prioritization Decision Assistance Tool (VI-SPDAT)

The Vulnerability Index and Service Prioritization Decision Assistance Tool (VI-SPDAT) developed and owned by OrgCode and Community Solutions is a triage tool that assists in informing an appropriate 'match' to a particular housing intervention to people based on their acuity in several core areas. Within those recommended housing interventions, the VI-SPDAT allows for prioritization based on presence of vulnerability across five components: (A) history of housing and homelessness (B) risks (C) socialization and daily functioning, (D) wellness - including chronic health conditions, substance usage, mental illness, and trauma, and (E) family unit. Version 2 of the VI-SPDAT for both people and families, released May 2015 and is currently undergoing implementation. The Raleigh/Wake Coordinated Entry System has agreed to use the VI-SPDAT as the universal assessment tool across the Continuum of Care for screening and matching people experiencing homelessness in Raleigh/Wake. Staff administering any of the SPDAT tools will be trained by an authorized trainer.

Planning, Staffing Roles, and Participation Responsibilities

Coordinated Entry System Continuum of Care Leadership

Leadership from the Continuum of Care Governance Board of Directors along with the CoC Quality Improvement Work Group (CoC QI) will conduct oversight and monitoring of Coordinated Entry functions to ensure consistent application of Coordinated Entry System policies and procedures and high-quality service delivery for those experiencing a housing crisis.

Continuum of Care Providers Serving People Experiencing Homelessness will:

1. **Adopt and follow Coordinated Entry System policies and procedures.** Coordinated Entry System participating providers shall maintain and adhere to these policies and procedures for Coordinated Entry System operations, and as established by the Coordinated Entry System Continuum of Care Leadership for access points, assessment procedures, prioritization, and referral to available services and housing.
2. **Maintain low barrier to enrollment.** Providers serving individuals or families experiencing homelessness shall limit barriers to enrollment in services and housing. Persons may not be turned away from crisis response services or homeless designated housing due to lack of income, lack of employment, disability status, or substance use unless the project's primary funder requires the exclusion, or a previously existing and documented neighborhood covenant/good neighbor agreement has explicitly limited enrollment to people with a specific set of attributes or characteristics. Providers maintaining restrictive enrollment practices must maintain documentation from project funders, providing justification for the enrollment policy.

CoC providers offering Prevention and/or Short-Term Rapid Re-housing assistance (i.e. 0 – 24 months of financial assistance) may choose to apply some income standards for their enrollment determinations.

3. **Maintain Fair and Equal Access.** Coordinated Entry System participating providers shall ensure fair and equal access to Coordinated Entry System programs and services for all people regardless of actual or perceived race or ethnicity, color, religion, national origin, age, gender identity, pregnancy, citizenship, familial status, household composition, disability, veteran status, or sexual orientation.

If a program participant's self-identified gender creates challenging dynamics among residents within a facility, the host program shall make every effort to accommodate the person or assist in locating alternative accommodation that is appropriate and responsive to the person's needs.

Coordinated Entry System participating providers shall offer universal program access to all subpopulations as appropriate, including chronically homeless people, veterans, youth, transgender people and people fleeing domestic violence.

Population-specific projects and those projects maintaining affinity focus (e.g. women only, veterans only, etc.) are permitted to maintain eligibility restrictions as currently defined and will continue to operate and receive prioritized referrals. Any new project wishing to institute exclusionary eligibility criteria will be considered on a case by case basis and receive authorization to operate as such on a limited basis from the Coordinated Entry System Continuum of Care Leadership and their funders.

4. **Provide appropriate safety planning.** Coordinated Entry System participating providers shall provide necessary safety and security protections for people fleeing or attempting to flee family violence, stalking, dating violence, or other domestic violence situations. Minimum safety planning must include a threshold assessment for presence of participant safety needs and referral to appropriate trauma-informed services if safety needs are identified.
5. **Create and share written eligibility standards.** Coordinated Entry System participating providers shall provide detailed written guidance for eligibility and enrollment determinations. Eligibility criteria should be limited to that required by the funder and any requirements beyond those required by the funder will be reviewed and a plan to reduce or eliminate them will be discussed. Eligibility and enrollment standards shall include funder specific requirements for eligibility and program-defined requirements such as characteristics, attributes, behaviors, or histories used to determine who is eligible to be enrolled in the program. These standards will be shared with the Coordinated Entry System Continuum of Care Leadership as well as funders.
6. **Communicate vacancies.** Homeless providers must communicate project vacancies, either bed, unit, or voucher, to the Coordinated Entry System Continuum of Care Leadership in a manner determined by and outlined in these policies and procedures.
7. **Limit enrollment to participants referred through the defined Coordinated Entry System access point(s).** Each bed, unit, or voucher that is required to serve someone who is homeless must receive their referrals through the prioritization criteria outlined below. Any agency filling homeless mandated units from alternative sources will be reviewed with funders for compliance. Coordinated Entry System access points will need to be informed of every opening and how and when they were filled.
8. **Participate in Coordinated Entry System planning.** CoC projects shall participate in Coordinated Entry System planning and management activities as defined and established by Coordinated Entry System Continuum of Care Leadership.

9. **Contribute data to HMIS if mandated per federal, state, county, or other funder requirements.** Each provider with homeless dedicated units will be required to participate in HMIS. Providers should work with the Raleigh/Wake HMIS Lead Agency and Local System Administrator with funding sources to determine specific forms and assessments required for HUD compliance within HMIS. Agencies must enter client data into HMIS within 24 hours of collection.
10. **Ensure staff who interact with the Coordinated Entry System process receive regular training and supervision.** Each provider must notify Coordinated Entry System Continuum of Care Leadership to changes in staffing, to ensure employees have access to ongoing training and information related to the Coordinated Entry System.
11. **Ensure individual rights are protected and people are informed of their rights and responsibilities.** People shall have rights explained to them verbally and in writing when completing an initial intake. At a minimum, rights will include:
 - The right to be treated with dignity and respect;
 - The right to appeal Coordinated Entry System decisions;
 - The right to be treated with cultural sensitivity;
 - The right to have an advocate present during the appeals process;
 - The right to request a reasonable accommodation in accordance with the project's tenant/person selection process;
 - The right to accept housing/services offered or to reject housing/services;
 - The right to confidentiality and information about when confidential information will be disclosed, to whom, and for what purposes, as well as the right to deny disclosure.
12. **Support transparency through marketing.** Coordinated Entry policies, procedures and services shall be advertised on the CoC Lead Agency's website. Providers shall post on their premises in a location clearly visible to program participants a notice stating participation in the CoC's Coordinated Entry System. The script for administration of the coordinated assessment tool, the VI-SPDAT, shall state that the reason that participants are surveyed using the VI-SPDAT is to provide entry to the system of services in a coordinated manner.
13. **Ensure universal program access.** All programs serving people who are homeless within the geographic bounds of the Raleigh/Wake CoC are encouraged to offer universal program access to all subpopulations as appropriate, including chronically homeless people, veterans, youth, transgender people and people fleeing domestic violence.

Coordinated Entry System Workflow and Policies

I. Coordinated Entry Workflow Overview

Street outreach, shelter, transitional housing staff, as well as day center, rapid re-housing and permanent supportive housing staff will work to ensure as many of the people they engage will be assessed with VI-SPDAT, are readily able to be located, motivated to pursue housing, in possession of the documentation required for potential housing options, and successfully engaged by Continuum of Care providers seeking to resolve their crisis of homelessness.

II. Access Models and Accessibility –Comprehensive, Accessible, and Understood

Raleigh/Wake, North Carolina utilizes a centralized access model with previously noted access points for adults without children, adults accompanied by children, unaccompanied youth and persons at risk of homelessness. Households who are included in more than one of these populations (for example, a parenting unaccompanied youth or an adult who presents both as unaccompanied and with children to different providers) will receive service at each of the access points for which they qualify as a target population. Regardless of initial access point(s), people experiencing homelessness or at risk of homelessness provide the same assessment approach, including standardized decision-making and assessment tool specific to each population (adults without children, adults accompanied by children, unaccompanied youth, and persons at risk of homelessness).

III. Safety Planning and Domestic Violence

Upon a household entering the homeless services system, providers conduct safety assessments to determine whether the household is fleeing, or is attempting to flee, domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening conditions that relate to violence against the household. The household should be processed in accordance with the following protocol:

- a. If during the initial engagement, concerns are identified about the household's immediate safety, the client should be referred to local law enforcement (911) and to a domestic violence shelter, through virtual access to the 24-Hour Crisis Line at 919.828.7740 or email at info@interactofwake.org
- b. If the client needs a domestic violence or other form of a protective order, they should be referred to Interact's Solace Center at 919.828.3067 or toll free at 866.291.0854 to obtain such an order.

If during the assessment, it is determined that the client presents an immediate safety risk to themselves or others, the individual performing the assessment should immediately contact 911 to assist in determining the appropriate course of action to ensure the safety of the clients and those around the client.

IV. Non-Discrimination

All CoC providers must operate with as few barriers to entry as possible. People may access emergency services, such as emergency shelter, independent of the operating hours of the

system's intake and assessment processes, by calling 919.861.1195 or <http://wake.nc.networkofcare.org>

Physical locations must be accessible to people with disabilities, including accessible locations for people who use wheelchairs, with a particular focus on people experiencing homelessness who are least likely to access homeless assistance.

CoC providers must ensure effective communication with people with disabilities, including provision of appropriate auxiliary aids and services necessary to ensure effective communication (e.g. Braille, audio, large type, assistive listening devices, and sign language interpreters) at the person's request.

Providers must also take reasonable steps to offer Coordinated Entry process materials and instruction in multiple languages to meet the needs of minority, ethnic, and groups with Limited English Proficiency (LEP).

V. Initial System Access

During the shelter stay or street outreach engagement, when concerns are raised about the household's immediate safety, the client should be referred to local law enforcement and domestic violence shelters through section III. Safety Planning and Domestic Violence.

When an emergency shelter or street outreach staff engages a person experiencing homelessness, they should update an existing HMIS record or create a new HMIS record according to complete the fields accompanying intake forms

Prior to HMIS data input, the person performing initial intake of the household must obtain a signed written consent to having the household's personally identifiable information entered into HMIS. For families experiencing homelessness, the consent form should be signed by all adults in the household. The head of household or authorized representative should also sign the consent forms on behalf of children in the household who are below the age of eighteen (18).

VI. Survey – Explaining What You're Doing and Why

The Vulnerability Index and Service Prioritization Decision Assistance Tool (VI-SPDAT) developed and owned by OrgCode and Community Solutions is a triage tool that assists in informing an appropriate 'match' to a housing intervention to people based on their acuity in several core areas. Within those recommended housing interventions, the VI-SPDAT allows for prioritization based on presence of vulnerability across four components: (a) history of housing and homelessness (b) risks (c) socialization and daily functioning (d) wellness - including chronic health conditions, substance usage, mental illness, and trauma and (e) family unit. Version 2 of the VI-SPDAT for single people, or VI-SPDAT released May 2015 and currently undergoing implementation. Raleigh/Wake's Coordinated Entry System has agreed to use the VI-SPDAT as

the universal assessment tool across the Continuum of Care for screening and matching people experiencing homelessness in Raleigh/Wake. Staff administering any of the SPDAT tools should be trained by an authorized trainer.

People engaged by providers representing the Coordinated Entry System should receive the same information regarding what that process involves. Assessors should communicate the survey process and its results clearly and consistently across the community. This ensures both that the benefits to participating in a survey are described clearly to encourage people to participate, but is equally important to make sure that people understand that participating does not guarantee (and may not result in) housing. It is also important that people receive a clear understanding of where their information will be shared. An example of what to standardize follows below, and is further described in Appendix B – Example Messaging:

- The name of the assessor and their affiliation (organization that employs them, volunteer as part of a Point in Time Count, etc.)
- The purpose of the VI-SPDAT being completed
- That it usually takes less than 10 minutes to complete
- That only “Yes,” “No,” or one-word answers are being sought
- That any question can be skipped or refused
- That the information is going to be stored in the Homeless Management Information System
- That other providers conducting assessments and the housing providers connected to the Coordinated Entry System will have access to the information so that the person does not need to complete the assessment multiple times, that housing providers can identify people to target for housing resources as they come available, and for planning purposes.
- That if the participant does not understand a question, clarification can be provided
- The importance of relaying accurate information to the assessor and not feeling that there is a correct or preferred answer that they need to provide, nor information they need to conceal

VII. Additional Population Specific Considerations

Veterans:

Providers serving veterans may require a Health Insurance Portability Accommodations Act (HIPAA)-compliant Release of Information to enable representatives from the Department of Veterans Affairs, the State, and other relevant stakeholders to ensure veterans are able to access the full spectrum of housing resources designated for this subpopulation.

Survivors of Domestic Violence:

People experiencing homelessness or at-risk of homelessness may not be denied access to the coordinated entry process on the basis that the person is or has been a victim of domestic violence, dating violence, sexual assault, or stalking. While people currently experiencing

homelessness have often previously survived domestic violence, the Violence Against Women Act (VAWA) prevents providers dedicated to serving this subpopulation from inputting their personally identifiable information within a Homeless Management Information System (HMIS) because of the additional safety precautions specific for this population. While the VI-SPDAT is not primarily a domestic violence-specific triage tool, providers dedicated to serving survivors of domestic violence can assess people that desire access to the broader range of housing options dedicated to people experiencing homelessness. Those results will need to be stored within a VAWA-compliant electronic system or in paper files secured according the full requirements of the law.

VIII. Survey Refusals

For limited instances when people refuse specific questions throughout the assessment process, the assessor may request permission to ask additional questions to utilize their conversation with the person, surveyor observation, documentation, and information from other professionals in order to provide responses. When staff encounter individuals or families who do not provide a response to any of the first questions, they should stop and acknowledge that the assessment will not provide useful information to support their housing crisis if the person receiving assessment does not want to participate. Staff should utilize continued progressive engagement and rapport building with these people until they are willing to be assessed. The VI-SPDAT should be completed in one engagement (although not necessarily first contact).

People who respond better to a conversational approach may benefit from the more comprehensive full SPDAT, further described in Appendix C – Full SPDAT Process.

IX. Survey – Concluding the Engagement

Upon completion of the VI-SPDAT, the Assessor may ask if the person is currently working with a provider towards one of those forms of housing assistance. If so, the person receiving the survey should be encouraged to continue to engage with their existing case management supports. If not, staff can provide a brief description of the resources currently available within the community and ask if the person is interested in specific forms of housing assistance.

Assessors should emphasize the importance of having reliable and comprehensive information regarding the best time and place to contact the person for quick access once a housing match is made. Staff should collect information on a consumer's whereabouts across a 24-hour period, beginning with where they wake up until they bed down at night, with notations for days when location patterns changed, and record that information within the VI-SPDAT. This includes where meals are obtained, transportation methods and times to and from meal and shelter providers, cross streets of locations where they receive services, outside agency names and staff with whom they engage, etc.

Assessors may emphasize that while completion of the assessment does not make them now the person's case manager, it remains critically important that the assessor possesses the most reliable methods possible for locating the person being assessed, especially if that includes an outside agency or staff attempting to contact the person later.

X. Next Steps – Collecting Documentation for Housing

Once the VI-SPDAT is completed, or as part of the initial engagements for people already assessed, staff should quantify which essential documents the person currently possesses, and begin working with them to begin collecting missing documents, as staff time and resources allow.

Assessors should emphasize that specific documentation is required for many programs, including but not limited to government issued photo identification, social security card, birth certificate, proof of income or zero income, verification of homelessness, and DD-214 for people who have served in the United States armed forces (regardless of discharge status or length of service).

Prioritization of Referrals

Upon successful VI-SPDAT completion, Continuum of Care providers including homelessness prevention, street outreach, transitional housing, rapid re-housing and permanent supportive housing will fill their case load (for services only programs) and/or beds (for housing programs) from the Coordinated Entry System according to the following prioritization criteria.

Providers will identify the eligibility requirements for each of their programs that they will be dedicating to the Coordinated Entry process and will be able to run a By-Name List report of VI-SPDAT results from people experiencing homelessness from within the HMIS. Once a referral is made following the prioritization criteria outlined below, the provider first contacts the VI-SPDAT interviewer to coordinate contact with the person and set up intake appointments before contacting the person directly. The housing provider commits to working with the assessor to locate the person and engage with them to verify if the housing referral provides a good match. The housing provider commits to communicating in writing with the Continuum of Care leadership when 50% or more of matches does not lead to successful program entry in order to facilitate more successful referrals (further outlined below).

The Housing Provider will document any unsuccessful matches and provide both the (A) reason(s) why they were not housed, (B) date of unsuccessful match/"un-assignment" and (C) name of the project being unassigned within HMIS so that the person can be reassigned to additional providers (further outlined below). The housing provider will also document when each match does lead to successful program entry and providing the date the person moves into housing within HMIS.

A. Homelessness Prevention Prioritization:

People experiencing homelessness will be referred to **Homelessness Prevention** according to the following prioritization criteria (each of the criteria for each category must be met before proceeding to people who do not meet the priority category 1):

Priority Category 1:

Imminent risk of eviction with documentation

B. Street Outreach Prioritization

People experiencing homelessness will be referred to **Street Outreach** per the following prioritization criteria (each of the criteria for each category must be met before proceeding to people who do not meet the priority category 1):

Priority Category 1:

Matched to transitional housing, rapid re-housing, or permanent supportive housing

C. Emergency Shelter Prioritization

People experiencing homelessness will be referred to **Emergency Shelter** per the following prioritization criteria (each of the criteria for each category must be met before proceeding to people who do not meet the priority category 1):

Priority Category 1:

Matched to transitional housing, rapid re-housing, or permanent supportive housing

D. Transitional Housing Prioritization

People experiencing homelessness will be referred to **Transitional Housing** per the following prioritization criteria (only proceeding to the next category when no one remains in the initial/previous category):

Priority Category 1:

People not experiencing chronic homelessness

Priority Category 2:

Highest VI-SPDAT score

E. Rapid Re-Housing Prioritization

People will be referred to ***Rapid Re-Housing*** per the following prioritization criteria (only proceeding to the next category when two or more people remain in the initial/previous category):

Priority Category 1:

Same as ***Permanent Supportive Housing*** when not available

Priority Category 2:

Highest ***Rapid Re-Housing*** recommended score (4-7 for people and 4-8 for families)

Priority Category 3:

Chronic homelessness

Priority Category 4:

Length of time homeless

Priority Category 5:

Overall wellness (domain D score of the VI-SPDAT)

F. Permanent Supportive Housing Prioritization

People experiencing homelessness will be referred to ***Permanent Supportive Housing*** per the following prioritization criteria (only proceeding to the next category when no people remain in the initial/previous category):

Priority Category 1:

Highest VI-SPDAT score

Priority Category 2:

Chronic homelessness

Priority Category 3:

Length of time homeless

Priority Category 4:

Overall wellness (domain D score of the VI-SPDAT)

Connection to Mainstream Resources:

Connection to Mainstream Resources People who may benefit from a connection to a mainstream service provider, such as the Department of Social Services, Legal Aid, income based housing or other services may be provided a referral to connect to these mainstream providers. All mainstream service referrals shall be documented in the HMIS and shall not prohibit the prioritization or matching into a supportive housing program for which the individual or household is eligible at the time a match is

identified. CoC Lead Agency staff shall engage key mainstream service providers to enhance and streamline the connection between their resources and CoC providers.

Unsuccessful Matches Process

By Person Experiencing Homelessness

People may reject a housing referral due to the health, safety or wellbeing of the person being compromised by the potential referral. Respecting choice and preference, people may also reject a housing referral due to not being willing to work with the housing provider to which they are referred. Rejections of housing referrals by people should be infrequent and must be documented in HMIS. Repeated rejections on behalf of staff, programs, and/or agencies may require case conferencing and additional from Continuum of Care leadership.

By Housing Provider

Raleigh/Wake CoC providers and program participants may deny or reject referrals from the Coordinated Entry System, although service denials should be infrequent and must be documented in HMIS. The specific allowable criteria for denying a referral shall be published by each project and be reviewed and updated annually or as they change, whichever happens first. All participating projects shall provide the reason for service denial, and may be subject to a limit on the number of service denials.

Agencies who would like to deny a referral that is incompatible with their programming must include details about the reason for denial. Documentation should include communication attempts with the person, specific criminal or housing history that prevents acceptance of referral, or other similar details. Some examples of denials that will need additional details or documentation include the following:

- Confirmed as doubled up/unhappily housed but not residing on streets/shelter
- Confirmed as relocating out of area
- Person unable to be located after multiple, documented attempts
- Ineligible for assigned provider
- Declined services from assigned provider
- Person confirmed as incarcerated
- Person confirmed as deceased

If the denial is the result of a third-party property management/landlord (private or partner of service provider) rejecting the person's application, the rejection will trigger a case conferencing meeting. If the household choose to appeal this decision, a new referral will not be provided to the housing program until the appeal process has reached its conclusion.

The Housing Provider will document any unsuccessful matches and provide both the (A) reason(s) why they were not housed and the (B) date of unsuccessful match/"un-assignment"

within HMIS so that the person can be reassigned to additional providers. The housing provider will also document when each match does lead to successful program entry and providing the date the person moves into housing within HMIS.

Re-Screening

While people generally do not need to be surveyed multiple times with the VI-SPDAT, there are circumstance under which people who have been screened using the VI-SPDAT would qualify to be re-screened, including the following:

- a. Someone has not had contact with the homeless services system for one year or more since the initial VI-SPDAT screening.
- b. Someone has encountered a significant life change defined as one of the following items: an adult member added or removed to their household, reunification with child, or SPMI identified by a credentialed professional.
- c. In rare occurrences, someone who is screened and referred to a housing program may be eligible for re-screening if the program identifies after extensive efforts the person needs a higher level of support than can be offered in that level of intervention.
- d. Someone who has known extensive history within the shelter and other emergency systems but whose acuity is not accurately depicted on their first screening.

Note: People who qualify under items C and D, listed above may benefit from the more comprehensive full SPDAT (or SPDAT) further described in Appendix C – Full SPDAT Process.

Coordinated Entry System Monitoring and Evaluation

Monitoring and Reporting of the Coordinated Entry System

When using an HMIS or any other data system to manage coordinated entry data, all participant information requires privacy protections according to the HMIS Data and Technical Standards at (CoC Program interim rule) 24 CFR 578.7(a)(8).

Providers may not deny services to people if they refuse to allow their data to be shared unless Federal statute requires collection, use, storage, and reporting of a participant's personally identifiable information (PII) as a condition of program participation.

HMIS users must understand and follow the privacy rules associated with collection, management, and reporting of client data according to the State and CoC HMIS Policies and Procedures. The State-defined monitoring process will report on performance objectives related to Coordinated Entry System utilization, efficiency, and effectiveness.

HUD has developed the following seven system-level performance measures to help communities gauge their progress in preventing and ending homelessness:

1. Length of time persons remains homeless;
2. The extent to which persons who exit homelessness to permanent housing destinations return to homelessness;
3. Number of homeless persons;
4. Jobs and income growth for homeless persons in CoC Program-funded projects;
5. Number of persons who become homeless for the first time;
6. Homelessness prevention and housing placement of persons defined by Category 3 of HUD's homeless definition in CoC Program-funded projects;
7. Successful housing placement;

The purpose of these measures is to provide a more complete picture of how well a community is preventing and ending homelessness. The number of homeless persons measure (#3) directly assesses a CoC's progress toward eliminating homelessness by counting the number of people experiencing homelessness both at a point in time and over the course of a year. The six other measures help communities understand how well they are reducing the number of people who become homeless and helping people become quickly and stably housed.

Reductions in the number of people becoming homeless are assessed by measuring the number of persons who experience homelessness for the first time (#5), the number who experience subsequent episodes of homelessness (#2), and homelessness prevention and housing placement for people who are unstably housed (Category 3 of HUD's homelessness definition) (#6). Achievement of quick and stable housing is assessed by measuring length of time homeless (#1), employment and income growth (#4), and placement when people exit the homelessness system (#7).

The performance measures are interrelated and, when analyzed relative to each other, provide a more complete picture of system performance. For example, the length of time homeless measure (#1) encourages communities to quickly re-house people, while measures on returns to homelessness (#2) and successful housing placements (#7) encourage communities to ensure that those placements are also stable. Taken together, these measures allow communities to evaluate the factors more comprehensively that contribute to ending homelessness.

Ongoing Training and Amendment of CES Policies and Procedures

The Raleigh/Wake Continuum of care will consult with each participating project and project participants at least annually to evaluate the intake, assessment, and referral processes associated with the Coordinated Entry system. Feedback requests must address the quality and effectiveness of the entire Coordinated Entry experience for both participating projects and households.

Participants will be identified through their Continuum-wide feedback requests made directly to participating agencies, through case managers, and through self-identification. Requests for modification, update, additions, or removals from current Coordinated Entry processes will be provided to the CoC Governance Board for approval.

CoC ensures adequate privacy protections of all participant information collected in the course of the annual coordinated entry evaluation, and no personally identifiable information will be included.

Appendices

Appendix A

Coordinated Entry System Program Component Definitions

Component definitions provide detailed descriptions of each CoC program type available through the Coordinated Entry System.

Street Outreach

Component Type	Essential Elements	Target Population
Emergency services and engagement intended to link unsheltered households who are homeless and in need of shelter, housing, and support services.	<p>Low-demand, street and community-based services that address basic needs (e.g., food, clothing, blankets) and seek to build relationships with the goal of moving people into housing and engaging them in services over time.</p> <p>In addition, outreach staff should provide or link single people with: case manager, assistance to develop a person-centered case management plan, housing placement and housing location support, on-site psychiatric and addictions assessment, medication, other immediate and short-term treatment, and assessment to other programs and services.</p>	<p>Homeless people on the streets, frequently targeting those living with mental illness(es), severe addiction(s), or dual-diagnoses</p> <p>As providers funded to end homelessness match single people to their available housing resources, street outreach will target people connected to a housing resource through these providers in order to demonstrate Coordinated Entry participation</p>

Prevention

Component Type	Essential Elements	Target Population
Prevention from homelessness includes financial assistance and services to prevent people and families from becoming homeless and help those who are experiencing homelessness to be quickly re-housed and stabilized. The funds under this program are intended to target people and families who would be homeless but for this assistance.	Programs can provide a variety of assistance, including: short-term or medium-term rental assistance and housing relocation and stabilization services, including such activities as mediation, credit counseling, security or utility deposits, utility payments, moving cost assistance, and case management.	People who are "at risk of homelessness."

Emergency Shelter

Component Type	Essential Elements	Target Population
Emergency Shelter programs providing stabilization and assessment; focusing on quickly moving all single people to housing, regardless of disability or background. Short-term shelter that provides a safe, temporary place to stay (for those who cannot be diverted from shelter) with focus on initial housing assessment, immediate housing placement and linkage to	Entry point shelter with: <ul style="list-style-type: none"> • showers, • laundry, • meals, • other basic services, • and linkage to case manager and housing counselor (co-located on-site), with the goal of helping households move into stable housing as quickly as possible. Shelters include an array of stabilization options that allow for varying degrees of participation and levels of support based on needs and engagement at the time they	People experiencing homelessness As providers funded to end homelessness match people to their available housing resources, emergency shelters will target people connected to a housing resource through these providers in order to demonstrate Coordinated Entry participation

other services.	enter the system (i.e., for those with chronic addictions, mental illness, and co-occurring disorders). On-site supportive service staff should conduct the VI-SPDAT of repeat people requesting such assessment following 7+ shelter nights to determine housing needs (e.g., unit size, rent levels, location), subsidy needs, and identify housing barriers, provide ongoing case management, and manage ongoing housing support and services that the person will need to remain stably housed	
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Rapid Re-Housing

Component Type	Essential Elements	Target Population
Rapid re-housing is an intervention designed to help people and families exit homelessness quickly and return to permanent housing. Rapid re-housing assistance is offered without preconditions (such as employment, income, absence of criminal record, or sobriety) and the resources and services provided are typically tailored to the unique needs of the household. While a rapid re-housing program must have all	<p>Housing Identification</p> <ul style="list-style-type: none"> Recruit landlords to provide housing opportunities for people and families experiencing homelessness. Address potential barriers to landlord participation such as concern about short term nature of rental assistance and tenant qualifications. <p>Rent and Move-In Assistance (Financial)</p> <ul style="list-style-type: none"> Provide assistance to 	People experiencing homelessness with temporary barriers to self-sufficiency

three core components available, it is not required that a single entity provide all three services nor that someone will utilize them all.	<p>cover move-in costs, deposits, and the rental and/or utility assistance (typically six months or less) necessary to allow people and families to move immediately out of homelessness and to stabilize in permanent housing.</p> <p>Rapid Re-Housing Case Management and Services</p> <ul style="list-style-type: none">• Help people and families experiencing homelessness identify and select among various permanent housing options based on their unique needs, preferences, and financial resources.• Help people and families experiencing homelessness address issues that may impede access to housing (such as credit history, arrears, and legal issues).• Help people and families negotiate manageable and appropriate lease agreements with landlords.• Make appropriate and time-limited services and supports available to families and people to allow them to	
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	<p>stabilize quickly in permanent housing.</p> <ul style="list-style-type: none">• Monitor participants' housing stability and be available to resolve crises, at a minimum during the time rapid re-housing financial assistance is provided.• Provide or assist households with connections to resources that help them improve their safety and well-being and achieve their long-term goals. This includes providing or ensuring that the person has access to resources related to benefits, employment and community-based services (if needed/appropriate) so that they can sustain rent payments independently when rental assistance ends.• Ensure that services provided are person-directed, respectful of people' right to self-determination, and voluntary. Unless basic, program-related case management is required by statute or regulation, participation in services should not be required to receive rapid re-housing assistance.	
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	<ul style="list-style-type: none"> Assist households to find and secure appropriate rental housing. 	
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Transitional Housing

Component Type	Essential Elements	Target Population
Safe, temporary apartments located in project-based or scattered-site housing that focuses on housing planning, addictions treatment, stabilization, and recovery for people and families with temporary barriers to self-sufficiency.	<p>Safe units located in site-based or scattered site housing that focuses on housing planning, addictions treatment, stabilization, and recovery for people and families with temporary barriers to self-sufficiency. Recognizing that a zero tolerance approach does not work for all people, transitional housing programs employ a harm reduction, or tolerant, approach to engage people and help them maintain housing stability. Housing assistance may be provided for up to two years, including rental assistance, housing stabilization services, landlord mediation, case management, budgeting, life skills, parenting support, and child welfare preventive services.</p> <p>Housing plan within two weeks.</p> <p>Average stay is six months.</p>	<ul style="list-style-type: none"> People experiencing homelessness contemplating recovery or newly in recovery, youth, ex-offenders, veterans (choosing GPD) People who are actively fleeing domestic violence

	<p>Could stay up to two years.</p> <p>All programs provide follow up case management post exit.</p> <p>Expectation of six months of post placement tracking to assess success</p>	
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Permanent Supportive Housing

Component Type	Essential Elements	Target Population
Project-based, clustered and scattered site permanent housing linked with supportive services that help residents maintain housing.	Permanent housing with supports that help people maintain housing and address barriers to self-sufficiency. PSH programs should provide subsidized housing or rental assistance; tenant support services Recognizing that relapse is part of the recovery process, PSH programs should hold units open for 30 days while people are in treatment or in other institutions. If a person returns to a program after 30 days and their unit was given to someone else, staff should work with that person to keep them engaged and place them in a unit when one is available. Some PSH programs should have a tolerant, or harm reduction, approach to engage people with serious substance abuse issues. While in PSH, people	People experiencing long-term homelessness, living with disabilities, and significant barriers to self-sufficiency.

	should receive supportive services appropriate to their needs from their case manager and/or the ACT multidisciplinary team.	
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Permanent**Housing – Market**

Component Type	Essential Elements	Target Population
Housing where people may stay indefinitely with temporary or long-term rental assistance and/or supportive services.	<p>Broad range of clustered or scattered-site permanent housing options for people with temporary barriers to self-sufficiency, including group living arrangements, shared apartments, or scattered-site apartments. People can receive rental subsidies (transitional or permanent, deep, or shallow) and supportive services. Both length and intensity of housing subsidy and services are defined on a case-by-case basis depending on their needs.</p> <p>Once people are housed, a multi-disciplinary case management team (lead by the primary case manager of an assigned PH provider) should conduct a comprehensive assessment and develop a long-term case management plan based on their needs. People should</p>	People who were formerly homeless

	maintain the same primary case manager for as long as they are in the homeless system, but members of the multi-disciplinary team may change as the person's needs change.	
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Appendix B

Example Messaging When Conducting VI-SPDATs

"My name is [] and I work for a group called []. I have a 10-minute survey I would like to complete with you. The answers will help us determine how we can go about providing supports. Most questions only require a "yes" or "no." Some questions require a one-word answer. All that I need from you is to be honest in responding, so that there isn't a "correct" or preferred answer that you need to provide, or information you need to conceal. We can come back to or skip any question you don't feel comfortable answering, and I can explain what I mean for any question that's unclear.

The information collected goes into the Homeless Management Information System, which will ensure that instead of going to agencies all over town to get on waiting lists, you will only have to fill out this paperwork one time. If you have a case manager who is helping you apply for housing, you should still work with them once you have finished this survey.

After the survey, I can give you some basic information about resources that could be a good fit for you. I want to make sure you know, though, that there are very few housing resources that are connected to the survey, so it's possible but unlikely that you would be housed through this process. The primary benefit to doing the survey is that it will help give you and me a better sense of your needs and what resources I can refer you to.

Would you like to take the survey with me?"

Appendix C

SPDAT Process

While the VI-SPDAT is a pre-screen or triage tool that looks to confirm or deny the presence of more acute issues or vulnerabilities, the SPDAT (or "full SPDAT" or "full SPDAT for single people") is an assessment tool looking at the depth or nuances of an issue and the degree to which housing may be impacted.

To provide a safety net for people that are presumed to be highly vulnerable but score too low on the VI-SPDAT to qualify for permanent supportive housing (i.e., 7 or below), those people may be recommended for full SPDAT assessment. The primary reason for recommending a SPDAT are when the person being assessed under or over-reports what the Assessor observes or knows through outside observation.

By allowing for assessors to spend the time to complete this more in-depth analysis, the small set of people whose full depth of vulnerability may not be reflected within their VI-SPDAT assessment may still be considered for street outreach or housing assignments. In a subset of these very limited instances, it is possible for a full SPDAT to produce different results than the VI-SPDAT because it is a multi-method assessment that incorporates more comprehensive outside information than the primarily self-reported information collected through the VI-SPDAT. Those who have received a full SPDAT assessment will periodically be reviewed through case conferencing and housing match processes.

In instances where people have both a full SPDAT and VI-SPDAT assessment, whenever possible, referral for housing placement will prioritize the full SPDAT and not solely the VI-SPDAT score.

Coordinated Entry System policies and Procedure Manual Written

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Attachment A

Conflict of Interest Policy for ESG Application

Any individual who has an interest in an agency applying for ESG funds has a conflict of interest and should not participate in the decision-making process to determine Wake CoC funding recommendations.

Any individual with a conflict of interest cannot vote on funding decisions or participate in discussions about how the Wake CoC will allocate funding for the current fiscal year. When people with conflicts of interest recuse themselves or abstain from voting due to conflict of interest, these recusals and/or abstentions should be reflected in Board or Agency Director meeting minutes.

People with conflicts of interest are not prohibited from participating in discussions about general the Wake CoC funding priorities, making a presentation about or answering questions about their project applications, or participating in completing the ESG Regional Application.

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Attachment B

Appeals

The Wake CoC will conduct the ESG application process with a high degree of professionalism and transparency so that local agencies are able to participate in the process as they wish and are able to clearly understand the local process.

If an agency would like to appeal a decision made by the Wake CoC the agency must submit a written grievance to the Wake CoC Board Chair, on agency letterhead within 10 days of the decision, stating:

- A detailed account of the grievance
- Why/how the agency believes the Wake CoC was in error
- Proposed solution(s)

The Board Chair or another designated member of the Board must reply to any grievance within 3 days, stating:

- Confirmation of receipt of grievance
- Details of the next steps regarding the appeal for both the agency and the Wake CoC
- A timeline with deadlines and/or meeting dates
- Wake CoC Board and State ESG Office staff will be carbon copied (cc) on this and any further correspondence regarding appeals.

The Wake CoC Board will identify a group (either a sub-group of the Board of Directors or an at-large Committee) to hear appeals and to determine a decision.

Within 15 days of receipt of a grievance, the group will respond in writing with:

- A summary of the grievance
- A recap of activities since the grievance was filed
- The decision of the Wake CoC Board of Directors
- If needed, any further steps or actions to be taken by the agency or Board, including a timeline with dates.

*Raleigh Wake Partnership to End and Prevent Homelessness***Attachment C*****Emergency Shelter***

Emergency Shelters will provide safe, temporary housing options that meet participants needs in accordance with the guidelines set by the Department of Housing and Urban Development (HUD). All Shelters in Raleigh/Wake will be low barrier where from the time of admission into the shelter, all are made aware of the goal to have them achieve housing as quickly as possible.

Purpose: Emergency Shelters temporary shelter for individuals and families in need of emergency housing. The community strives to provide permanent housing within 30 days for individuals and families residing in an emergency shelter through the use of the Housing First Model.

In a Housing First environment Emergency Shelters are focused on ending homelessness for the households they serve and in the community. Shelters should be safe, non-judgmental environments where from the time of admission into the shelter, all residents are made aware of the goal to have them achieve housing as quickly as possible. The individual or family should be encouraged to access community-based mainstream resources or their natural supports to help move them out of the shelter and into housing.

** Noting that Domestic Violence Shelters have certain legal obligations to follow.*

Community Process:

Shelters that receive ESG funds participate in the coordinated intake process that is intended to provide immediate referrals to service(s) needed. Shelters that receive ESG funds will also be required to participate in the coordinated entry/assessment pilot that will designed to move people who are homeless to permanent housing through:

- Collaborative Partners: As part of the Combined Funding RFP all Shelters are required to have memorandums of agreement or understanding with at least one rapid rehousing service agency to more swiftly move persons into housing as quickly as possible.
- Diversion: For those households that have another safe option for housing for the night besides shelter, the system will assist the households to return to those options rather than entering the homeless system. National data show that diversion programs reduce entries into homelessness.
- Streamlining referral process: The coordinated assessment system coordinates referrals to permanent housing programs so that people will receive program referrals that fit a program's eligibility criteria and are appropriate to the need of the household. This system also reduces the time spent by households in seeking assistance from community programs.

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- Connecting programs: Coordinated assessment systemizes coordination efforts so that shelters are partnering with permanent housing programs on the local level. Policy
- Tracking system outcomes: HMIS reports will be generated by Shelters on a monthly or quarterly basis that indicates the number of people entering shelter, emergency services, and permanent housing. The Homeless Service System Work Group and CoC staff will examine these reports to identify system gaps and redirect resources accordingly in order to quickly move households into permanent housing.

Shelter Procedures:

1. Starting in 2017, all Shelters will participate in the Continuum of Care's (COC's) coordinated entry process *Not applicable to those fleeing domestic violence.
2. Those individuals and families who cannot be diverted are prioritized for Shelter beds * not applicable for those fleeing domestic violence.
3. Within one week of entry into the Shelter, staff will complete the VI-SPDAT/VI-SPDATF with the individual or family. The scores will be recorded in HMIS.
4. Upon completion of the VI-SPDAT or VI-SPDATF if score recommends, a release of information will be completed for the individual and/or family. Shelter staff will submit a referral along with a copy of the assessment and release of information to a permanent housing provider.

Emergency Shelter - Prioritization

Emergency Shelters play a critical role in a crisis response system. The goal is to assist persons through their housing crisis by assessing their needs and providing appropriate services while providing a safe place to stay that is low barrier and permanent housing focused.

Prioritization Criteria:

1. Emergency Solutions Grant funded Shelters must participate in Coordinated Entry. All persons that are literally homeless will be assessed using the VI-SPDAT or the VI-SPDATF and be placed on a community-wide prioritization list.
2. Priority is given to individuals and families who are first time guests, youth ages 18-24, chronically homeless and/or veterans.
3. Lottery system is used if there are more guests than beds available.

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Attachments D1-3

Rapid Re-Housing Prioritization

Clients are prioritized to receive rapid re-housing financial assistance and services using the community coordinated entry and assessment process, available rapid re-housing financial assistance is provided to eligible households who are literally homeless, living in shelter or a place not meant for human habitation.

As part of the Coordinated Entry pilot, clients within the shelter system will be screened using the VI-SPDAT assessment and a referral will be made from a partnering Shelter.

Clients are not required to have income, participate in treatment, practice sobriety or be "housing ready" in any way as a program prerequisite. Clients will be fully involved in housing location based on availability, affordability and landlord approval.

Clients determine the frequency, type and duration of supports within the general program expectations. Clients can refuse services at any time. Termination should be limited to the most severe cases. Programs will exercise sound judgment and examine all extenuating circumstances when determining if violations warrant program termination. The CoC will establish protocols to close a client's file, following all applicable laws.

Rent & Utility Standards

Clients pay 30% of their net income for rent and utilities unless there are other factors determined by case managers.

Assistance is based in providing "the least amount of assistance for the least amount of time" while providing enough initial support to be reasonably sure that the client is stably housed. Agencies are encouraged to be highly flexible and look at each household's particular needs when determining an individualized plan that will include the amount of financial subsidies and services. Since agencies are required to serve those with higher needs before those with lower needs, it is expected that some households will not have income at program entry. Agencies are expected to offer assistance with the goal of providing "the lightest touch possible" while also meeting clients where they are and ensuring a long-term positive exit to permanent housing. Given all of this, agencies must be highly flexible and there should not be a standard percentage of rent clients are to pay.

The maximum number of months a program participant will be provided rental assistance is 12-24 months in accordance with ESG regulations. Ongoing evaluation will determine continued need for assistance.

Permanent Supportive Housing

All recipients of Continuum of Care (CoC) Permanent Supportive Housing (PSH) are required to follow these written standards required by their grant agreement.

Purpose: These written standards reflect the new definition of chronically homeless as

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amended by the Final Rule on Defining “Chronically Homeless” (herein referred to as the Definition of Chronically Homeless final rule) and updates the orders of priority that were established under the prior Notice. CoCs that previously adopted the orders of priority established in Notice CPD-14-012, which CPD-16-11 supersedes.

PSH must be targeted to serve chronic homeless persons with the highest needs and greatest barriers toward obtaining and maintaining housing.

Goals of the Orders of Priority

The overarching goal of this Notice is to ensure that those individuals and families who have spent the longest time in places not meant for human habitation, in emergency shelters, or in safe havens and who have the most severe service needs within a community are prioritized for PSH. These written standards revises the orders of priority related to how persons should be selected for PSH as previously established in Notice CPD-14-012 to reflect the changes to the definition of chronically homeless as defined in the Definition of Chronically Homeless final rule.

Two goals achieved through these standards:

1. Establish a recommended order of priority for dedicated and prioritized PSH that ensure persons with the longest histories residing in places not meant for human habitation, in emergency shelters, and in safe havens and with the most severe service needs are given first priority.
2. Establish a recommended order of priority for PSH that is not dedicated or prioritized for chronic homelessness in order to ensure that those persons who do not yet meet the definition of chronic homelessness but have the longest histories of homelessness and the most severe service needs, and are therefore the most at risk of becoming chronically homeless, are prioritized.

Key Terms:

Housing-First is a model of housing assistance that prioritizes rapid placement and stabilization in permanent housing that does not have service participation requirements or preconditions for entry (such as sobriety or a minimum income threshold). HUD encourages all recipients of CoC Program-funded PSH to follow a Housing First approach to the maximum extent practicable.

“Chronically Homeless” is defined in the Chronically Homeless Final rule as:

- (a) A “homeless individual with a disability,” as defined in section 401(9) of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11360(9)), who:

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- i. Lives in a place not meant for human habitation, a safe haven, or in an emergency shelter; and
- ii. Has been homeless and living as described in paragraph (a)(i) continuously for at least 12 months or on at least four separate occasions in the last 3 years, as long as the combined occasions equal at least 12 months and each break in homelessness separating the occasions included at least 7 consecutive nights of not living as described in paragraph (a)(i). Stays in institutional care facilities for fewer than 90 days will not constitute as a break in homelessness, but rather such stays are included in the 12-month total, as long as the individual was living or residing in a place not meant for human habitation, a safe haven, or an emergency shelter immediately before entering an institutional care facility;

(b) An individual who has been residing in an institutional care facility, including a jail, substance abuse or mental health treatment facility, hospital, or other similar facility, for fewer than 90 days and met all of the criteria in paragraph (a) of this definition, before entering the facility;

(c) A family with an adult head of household (or if there is no adult in the family, a minor head of household) who meets all of the criteria in paragraph (a) or (b) of this definition (as described in Section I.D.2(a) of this Notice), including a family whose composition has fluctuated while the head of household has been homeless.

Severity of Service Needs refers to persons who have been identified as having the most severe service needs.

- (a) For the purposes of this Notice, this means an individual for whom at least one of the following is true:
 - i. History of high utilization of crisis services, which include but are not limited to, emergency rooms, jails, and psychiatric facilities; and/or
 - ii. Significant health or behavioral health challenges, substance use disorders, or functional impairments that require a significant level of support in order to maintain permanent housing.
 - iii. For youth and victims of domestic violence, high risk of continued trauma or high risk of harm or exposure to very dangerous living situations.
 - iv. When applicable CoCs and recipients of CoC Program-funded PSH may use an

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alternate criteria used by Medicaid departments to identify high- need, high cost beneficiaries.

- (b) Severe service needs as defined in paragraphs i-iv above should be identified and verified through data-driven methods such as an administrative data match or through the use of a standardized assessment tool and process and should be documented in a program participant's case file. The determination must not be based on a specific diagnosis or disability type, but only on the severity of needs of the individual. The determination cannot be made based on any factors that would result in a violation of any nondiscrimination and equal opportunity requirements, see 24 C.F.R. § 5.105(a).

I. Dedication and Prioritization of Permanent Supportive Housing Strategies to Increase Number of PSH Beds Available for Chronically Homeless Persons

A. Increase the number of CoC Program-funded PSH beds that are dedicated to persons experiencing chronic homelessness.

Dedicated PSH beds are those that are required through the project's grant agreement to only be used to house persons experiencing chronic homelessness unless there are no persons within the NC505 geographic area that meet that criteria. If there is no persons within the NC507 geographic area that meet the definition of chronically homeless at a point in which a dedicated PSH bed is vacant, the recipient may then follow the order of priority for non- dedicated PSH established in these standards. However, that bed will continue to be a dedicated bed so when it becomes vacant, again it must be used to house a chronically homeless person unless there are still no persons who meet that criterion within the NC507 geographic area at that time. These PSH beds are also reported as on the NC507 Housing Inventory Count (HIC).

B. Prioritize non-dedicated PSH beds for use by persons experiencing chronic homelessness.

Prioritization means implementing an admissions preference for chronically homeless persons for CoC Program-funded PSH beds. During the CoC Program competition project applicants for CoC Program-funded PSH indicate the number of non-dedicated beds that will be prioritized for use by persons experiencing chronic homelessness during the operating year of that grant, when awarded. Projects are then required to prioritize chronically homeless persons in their non-dedicated CoC Program-funded PSH beds for the applicable operating year as the project application is incorporated into the grant agreement.

All recipients of non-dedicated CoC Program-funded PSH are encouraged to prioritize the chronically homeless as beds become vacant to the maximum extent practicable, until there are no persons within the NC507 geographic area who meet those criteria. The total number of non-dedicated beds designated as being prioritized for the

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chronically homeless may be increased at any time during the operating year and may occur without an amendment to the grant agreement.

V. Order of Priority in CoC Program-funded Permanent Supportive Housing

- A. Prioritizing Chronically Homeless Persons in CoC Program-funded Permanent Supportive Housing Beds Dedicated or Prioritized for Occupancy by Persons Experiencing Chronic Homelessness
 1. These written standards include an order of priority for CoC Program-funded PSH that is dedicated or prioritized for persons experiencing chronic homelessness that is based on the length of time in which an individual or family has resided in a place not meant for human habitation, a safe haven, or an emergency shelter and the severity of the individual's or family's service needs. Recipients of CoC Program-funded PSH that is dedicated or prioritized for persons experiencing chronic homelessness are required to follow this of priority when selecting participants for housing, in a manner consistent with their current grant agreement.
 2. Where there are no chronically homeless individuals and families within the NC507 geographic area recipients of CoC Program-funded PSH will follow the order of priority in these standards.
 3. Recipients of CoC Program-funded PSH will follow the order of priority above while also considering the NC507 goals and any identified target populations served by the project. For example, a CoC Program-funded PSH project that is permitted to target homeless persons with a serious mental illness should follow the order of priority to the extent in which persons with serious mental illness meet the criteria. If there were no persons with a serious mental illness that also met the criteria of chronically homeless within the NC507 geographic area, the recipient should follow the order of priority under Section III.B for persons with a serious mental illness.
 4. Recipients must exercise due diligence when conducting outreach and assessment to ensure that chronically homeless individuals and families are prioritized for assistance based on their total length of time homeless and/or the severity of their needs. Persons—particularly those living on the streets or in places not meant for human habitation—might require significant engagement and contacts prior to their entering housing and recipients of CoC Program-funded PSH are not required to allow units to remain vacant indefinitely while waiting for an identified chronically homeless person to accept an offer of PSH. CoC Program-funded PSH providers are encouraged to follow a Housing First approach to the maximum extent practicable. Therefore, a person experiencing chronic homelessness should not be forced to refuse an offer of PSH if they do not want

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to participate in the project's services, nor should a

PSH project have eligibility criteria or preconditions to entry that systematically exclude those with severe service needs. Street outreach providers should continue to make attempts to engage those persons that have been resistant to accepting an offer of PSH and where the CoC has adopted these orders of priority into their written standards, these chronically homeless persons must continue to be prioritized for PSH until they are housed.

B. Prioritizing Chronically Homeless Persons in CoC Program-funded Permanent Supportive Housing Beds Not Dedicated or Not Prioritized for Occupancy by Persons Experiencing Chronic Homelessness

1. CoC Program-funded PSH that are not dedicated or prioritized for the chronically homeless would be required to follow this order of priority when selecting participants for housing, in a manner consistent with their current grant agreement.

(a) First Priority—Homeless Individuals and Families with a Disability with Long Periods of Episodic Homelessness and Severe Service Needs

An individual or family that is eligible for CoC Program-funded PSH who has experienced fewer than four occasions where they have been living or residing in a place not meant for human habitation, a safe haven, or in an emergency shelter but where the cumulative time homeless is at least 12 months and has been identified as having severe service needs.

(b) Second Priority—Homeless Individuals and Families with a Disability with Severe Service Need

An individual or family that is eligible for CoC Program-funded PSH who is residing in a place not meant for human habitation, a safe haven, or in an emergency shelter and has been identified as having severe service needs. The length of time in which households have been homeless should also be considered when prioritizing households that meet this order of priority, but there is not a minimum length of time required.

(c) Third Priority—Homeless Individuals and Families with a Disability Coming from Places Not Meant for Human Habitation, Safe Haven, or Emergency Shelter Without Severe Service Needs.

An individual or family that is eligible for CoC Program-funded PSH who is residing in a place not meant for human habitation, a safe haven, or an emergency shelter where the individual or family has not been identified as having severe service needs. The length of time in which households have been homeless should be considered when prioritizing households that meet

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this order of priority, but there is not a minimum length of time required.

(d) Fourth Priority—Homeless Individuals and Families with a Disability Coming from Transitional Housing.

An individual or family that is eligible for CoC Program-funded PSH who is currently residing in a transitional housing project, where prior to residing in the transitional housing had lived in a place not meant for human habitation, in an emergency shelter, or safe haven. This priority also includes individuals and families residing in transitional housing who were fleeing or attempting to flee domestic violence, dating violence, sexual assault, or stalking and prior to residing in that transitional housing project even if they did not live in a place not meant for human habitation, an emergency shelter, or a safe haven prior to entry in the transitional housing.

2. Recipients of CoC Program-funded PSH should follow the order of priority above, as adopted by the CoC, while also considering the goals and any identified target populations served by the project. For example, non-dedicated or non-prioritized CoC Program-funded PSH that is permitted to target youth experiencing homelessness should follow the order of priority under Section III.B.1. to the extent in which youth meet the stated criteria.
3. Recipients must exercise due diligence when conducting outreach and assessment to ensure that persons are prioritized for assistance based on their length of time homeless and the severity of their needs following the order of priority as adopted by the CoC. Some persons—particularly those living on the streets or in places not meant for human habitation—might require significant engagement and contacts prior to their entering housing and recipients are not required to keep units vacant indefinitely while waiting for an identified eligible individual or family to accept an offer of PSH. Recipients of CoC Program-funded PSH will follow a Housing First approach to the maximum extent practicable. Street outreach providers should continue to make attempts to engage those persons that have been resistant to accepting an offer of PSH and these individuals and families must continue to be prioritized until they are housed.

VI. Using Coordinated Entry and a Standardized Assessment Process to Determine Eligibility and Establish a Prioritized Waiting List

A. Coordinated Entry Requirement

Provisions at 24 CFR 578.7(a)(8) requires each CoC to establish and operate either a centralized or coordinated assessment system that provides an initial,

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comprehensive assessment of the needs of individuals and families for housing and services. These written standards incorporate a coordinated entry process to ensure there is a single prioritized list for all CoC Program-funded PSH within NC507.

B. Written Standards for Creation of a Single Prioritized List for PSH

All CoC Program-funded PSH will accept referrals only through a single prioritized list that is created through the NC507 coordinated entry process and informed by the CoC's street outreach and other administrative data systems. Adoption of this referral process into the NC507 policies and procedures for coordinated entry will further ensure that CoC Program-funded PSH is being used most effectively. The single prioritized list should be updated frequently to reflect the most up-to-date and real-time data as possible.

C. Standardized Assessment Tool Requirement

Agencies must utilize the standardized assessment tool and referral requirements in accordance with 24 CFR 578.3 and these written standards.

D. Nondiscrimination Requirements

Recipients of CoC Program-funded PSH must continue to comply with the nondiscrimination provisions of Federal civil rights laws, including, but not limited to, the Fair Housing Act, Section 504 of the Rehabilitation Act, Title VI of the Civil Rights Act, and Titles II or III of the Americans with Disabilities Act, as applicable. See 24 C.F.R. § 5.105(a).

VII. Recordkeeping Recommendations the Orders of Priority

Documentation requirements are outlined in 24 CFR 578.103(a)(4) for all recipients of dedicated and non-dedicated CoC Program-funded PSH for determining whether or not an individual or family is chronically homeless for the purposes of eligibility. In addition to those requirements, recipients of CoC Program-funded PSH will maintain evidence of implementing these priorities. Evidence of following these orders of priority may be demonstrated by:

- A. Evidence of Severe Service Needs.** Evidence of severe service needs is that by which the recipient is able to determine the severity of needs as defined using data-driven methods such as an administrative data match or through the use of a standardized assessment. The documentation should include any information pertinent to how the determination was made, such as notes associated with case- conferencing decisions.
- B. Evidence that the Recipient is Following the CoC's Written Standards for Prioritizing Assistance.** Recipients must follow these written standards for prioritizing assistance, as adopted by the CoC. In accordance with the written

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standards for prioritizing assistance, recipients must document that the CoC's revised written standards have been incorporated into the recipient's intake procedures and that the recipient is following its intake procedures when accepting new program participants into the project.

C. Evidence that there are no Households Meeting Higher Order of Priority within NC505 Geographic Area.

(a) When dedicated and prioritized PSH is used to serve non-chronically homeless households, the recipient of CoC Program-funded PSH should document how it was determined that there were no chronically homeless households identified for assistance within the NC507 geographic area. This documentation should include evidence of the outreach efforts that had been undertaken to locate eligible chronically homeless households within the defined geographic area and, where chronically homeless households have been identified but have not yet accepted assistance, the documentation should specify the number of persons that are chronically homeless that meet this condition and the attempts that have been made to engage the individual or family. The recipient of PSH may refer to that list as evidence to satisfy this evidence.

(b) When non-dedicated and non-prioritized PSH is used to serve an eligible individual or family that meets a lower order of priority, the recipient of CoC Program-funded PSH should document how the determination was made that there were no eligible individuals or families within the NC505 geographic area. The recipient of PSH may refer to the priority list as evidence that there were no households identified within the NC507 geographic area that meet a higher order of priority.

*Raleigh Wake Partnership to End and Prevent Homelessness***Attachment D-4*****Non-ESG Funds***

Non State ESG funds are allocated in Wake to support Rapid Re-Housing Financial Assistance in the following ways:

1. The Raleigh Wake Partnership to End and Prevent Homelessness (Partnership) along with the City of Raleigh and Wake County have initiated a Combined Competitive RFP process. Through this process, we have determined community priorities driven from HMIS data to establish priority populations to be served as well as services needed including additional funding for rapid rehousing programs. City ESG and Wake County Housing dollars are allocated to support rapid re-housing.
2. Volunteers of America and Passage Home are current SSVF grant recipients and have funds allocated to serve Veterans in Wake.
3. Through the annual CoC competition, the Partnership Board has determined community priorities driven from HMIS data to establish priority populations to be served as well as services needed including additional funding for rapid rehousing programs.
4. Participating as funding review members for funding applications.
5. Participating in the Consolidated Plan process with local jurisdiction to express need for allocating dollars to financial assistance.
6. CoC provides written letters of support for agencies in funding application processes i.e. SSVF, CSBG